

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90180 030 ***158.75

DOCUMENT # P01000043613

1. Entity Name
BIRUSA, INC.



Principal Place of Business
**2742 BISCAYNE BLVD.
MIAMI, FL 33137**

Mailing Address
**2742 BISCAYNE BLVD.
MIAMI, FL 33137**

40062588



2. Principal Place of Business
1320 South Dixie Highway

3. Mailing Address
1320 South Dixie Highway

Suite, Apt. #, etc.
Ste 1061

Suite, Apt. #, etc.
Ste 1061

03292006 Chg-P CR2E034 (11/05)

City & State
Coral Gables FL

City & State
Coral Gables FL

4. FEI Number
65-1112131

Applied For
☐ Not Applicable

Zip
33146

Country
US

Zip
33146

Country
US

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MALZ, ISAAL PA
2742 BISCAYNE BLVD
MIAMI, FL 33131**

7. Name and Address of New Registered Agent

Name
Jorge L Aldecoa

Street Address (P.O. Box Number is Not Acceptable)
1320 South Dixie Highway Ste 1061

City
Coral Gables

FL

Zip Code
33146

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Jorge L Aldecoa

Jorge L Aldecoa

4-3-06

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

**RULE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **MATZ, ISAAC CPA**
STREET ADDRESS **2742 BISCAYNE BLVD.**
CITY- ST- ZIP **MIAMI, FL 33137**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Change ☒ Addition
NAME **Jorge L Aldecoa**
STREET ADDRESS **1320 South Dixie Highway Ste 1061**
CITY- ST- ZIP **Coral Gables FL 33146**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Jorge L Aldecoa

Jorge L Aldecoa

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

4-B-01

305-665-5303

Date

Electronic Filing #