


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 13, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P01000052062**

1. Entity Name  
**BARREIRO AND PEREZ, INC.**



Principal Place of Business  
**14600 S W 136TH ST  
 MIAMI, FL 33186**

Mailing Address  
**C/O ELLIOT HARRIS  
 111 SW 3RD ST 6TH FLOOR  
 MIAMI, FL 33130**



02072006 No Chg-P CR2ED34 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-1107843** Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**HARRIS, ELLIOTT  
 111 S W 3RD ST 6TH FL  
 MIAMI, FL 33130**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE 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

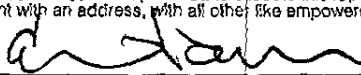
000000433160  
 02/24/06-80007-002 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD PEREZ, RAFAEL 14600 SW 136TH ST MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS HARRIS, ELLIOTT 111 SW 3RD ST 6TH FLR MIAMI, FL 33130
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**DO NOT WRITE IN THIS SPACE**

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:  Assistant Secretary  
 \_\_\_\_\_ Date: **2/9/06** Daytime Phone #: **(305) 358-0146**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR