## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

## FILED Sep 05, 2006 8:00 am Secretary of State 09-05-2006 90024 040 \*\*\*550.00

DOCUMENT # P01000062921  1. Entity Name PRADO'S CO.						09-05-2006 90024 040 ***550.00				
Principal Place		Mailing Address 5956 BENT PINE DB					PUU30	100		
ORLANDÓ, FI	32822 US	ORLANDO PL 32822	US			1 10051001 478	<b>46</b> (8) (18) (18) (18)		   <b>                                   </b>	<b>    </b>
2. Principal Place of Business 3. Mailing Address 143 Som ERSWORTH JR					., .					
Suite, Apt.		Suite, Apt. #, etc.				04122006	Chg-P	CR2E034	(11/05)	
City & State		City & State				4. FEI Number Applied For 59-3735085 Not Applicable				
3283	Country	Zip -	Count	try		5. Certificate	of Status Desired		8.75 Add e Required	
	6. Name and Address of Current F	Registered Agent				7. Name and	Address of New R	legistered Ag	ent	
				Mame A A	70	0,	CIA Z			i
PRADO, PATRICIÁ Z 4546 S. SEMORAN BLVD				Street Address (P.O. Box Number is Not Acceptable) 7145 SOMERSWORTH DR						
PO BOX 535 ORLANDO FL 32822				714	<u>o</u>	2011 61	<u> </u>			
				City O	e LA	N 00		FL	Zio Code	ें ३८
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registere	ed office or	register	ed agent, or bo	th, in the State of Flo	orida. I am fan	niliar with,	and accept
SIGNATURE_										
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	Registered	d Agent signatu	re required	when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.					¢.	00				
Atter Ma					Adde	00 May Be ed to Fees				·
10.	ay 1, 2006 Fee will be \$550.0	Trust Fund Contr			Adde		CHANGES TO OFF	ICERS AND D	IRECTORS	3 IN 11
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indicated on this report or supplies and rules mind uoes not quality 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 a process, with all other like empowered.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR