

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000063377 1. Entity Name DOLLAR NETWORK INC.	
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Principal Place of Business 12288 S.W. 131 AVE. MIAMI, FL 33186	Mailing Address 12288 S.W. 131 AVE. MIAMI, FL 33186
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01112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1116015	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent CRISTOBAL, ELSA 12119 SOUTH DIXIE HIGHWAY MIAMI, FL 33156

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

**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

000000442673
03/04/06 80028-013 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD CRISTOBAL, ELSA 12288 S.W. 131 AVE. MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CRISTOBAL, KATRINA 12288 S.W. 131 AVE. MIAMI, FL 33186
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 officers empowered.

SIGNATURE:  **Elsa Cristobal** **1/12/06** **305-251-7700**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
President