

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000064779

Entity Name: ISRAEL BETANCES INC.

FILED
May 26, 2006
Secretary of State**Current Principal Place of Business:**12359 N.W. 7TH LANE
MIAMI, FL 33182**New Principal Place of Business:****Current Mailing Address:**12359 N.W. 7TH LANE
MIAMI, FL 33182**New Mailing Address:**

FEI Number: 65-1117333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:BETANCES, ISRAEL
12365 SW 18TH ST #402
MIAMI, FL 33175 US**Name and Address of New Registered Agent:**SOSA, RAFAELA T
12359 NW 7 LN
MIAMI, FL 33182 US

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.

SIGNATURE: RAFAELA T. SOSA

05/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DPVS () Delete
Name: BETANCES, ISRAEL F
Address: 12359 N.W. 7TH LANE
City-St-Zip: MIAMI, FL 33182Title: T () Delete
Name: BETANCES, ISRAEL
Address: 12365 SW 18TH ST #402
City-St-Zip: MIAMI, FL 33175**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: DPVS (X) Change () Addition
Name: SOSA, RAFAELA T
Address: 12359 N.W. 7TH LANE
City-St-Zip: MIAMI, FL 33182Title: T (X) Change () Addition
Name: SOSA, RAFAELA T
Address: 12359 NW 7 LN
City-St-Zip: MIAMI, FL 33182

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAFAELA T. SOSA

P

05/26/2006

Electronic Signature of Signing Officer or Director

Date