2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 13, 2006 8:00 am DOCUMENT # P01000093103 **Secretary of State** LLANOS Y ASOCIADOS, CORP. 03-13-2006 90090 008 ***150.00 Principal Place of Business Mailing Address 4354-NW-9TH-AVENUE-4354 NW 9TH AVENUE **SUITE 13-10 SUITE 13-10** POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02282006 CR2E034 (11/05) Cha-P City & State City & State Applied For 4. FEI Number 65-1139485 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Brunet Luiza BRAJUAN, OLAIZOLA 450 SW 22ND AVE FT LAUDERDALE, FL 33312 Zip Code 3306년 Pompano Beach 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. Signature, typed or printert name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Addition Delete Change Brunet VAZQUEZ, JOSE LLANOS NAME NAME 4354 NW 9 DUE # 13 STREET ADDRESS 450 SW 22ND AVE STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33312 CITY-ST-7IP TITLE TITLE Delete ☐ Change 🔀 Addition OLAIZOLA, BARAJUAN NAME NAME 4354 NW 9 De # 13 STREET ADDRESS 450 SW 22ND AVE STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33312 CITY-ST-7IP TITLE X Delete TITLE ☐ Addition MIREN, OLAIZOLA B NAME STREET ADDRESS 450 SW 22 AVE STREET ADORESS FORT LAUDERDALE, FL 33312 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Dolete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZiP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS 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.

- Luiza Brunet

FILED

2/27/06 (954)942-9691