

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90010 035 ***150.00

DOCUMENT # P01000094040

1. Entity Name
MACAND REALTY CORP.



Principal Place of Business

**10250 SW 56 STREET
#D-201
MIAMI, FL 33165 US**

Mailing Address

**10250 SW 56 STREET
#D-201
MIAMI, FL 33165 US**



01102006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1141520

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**TUYA, MARIA C
10240 SW 56 STREET
#112-D
MIAMI, FL 33165**

**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

Maria C Tuya

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/31/06
DATE

**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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MACIAS, JUAN C
STREET ADDRESS	2601 SW 134 CT
CITY-ST-ZIP	MIAMI, FL 33182
TITLE	VD
NAME	MACIAS, CAROLINA
STREET ADDRESS	2601 SW 134 CT
CITY-ST-ZIP	MIAMI, FL 33182
TITLE	VD
NAME	MEDEROS, AMADO
STREET ADDRESS	800 WEST AVE. #440
CITY-ST-ZIP	MIAMI BEACH, FL 33139

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/06
Date

(305) 279-6442
Daytime Phone #