2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2006 8:00 am Secretary of State

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1. Entity Nam	ne	# P01000102			05-04-2006		***15	0.00		
Principal Plac	e of Busines	is	Mailing Address				4008262	Z		
3305 NW 79		•	-			1 ,	400000			
MIAMI, FL 3		c	C/O LOPEZ ACCOUNTING 1800 W 49TH STREET #121				.*.			
WINNI, IL 3	3147 0.	J.	HIALEAH, FL 33012 US			••		•		
			C/O LOPEZ				E an cer jedie nach ander an	181 HERN BRITE HOLD	E(161 868 831	A
2. Principal P	lace of Busin	1000	3/Mailing Address			—— 				
Z. Finicipal F	ace or bosa	11627	1800 W. 49 St.				E 49 106 Boil Doile 10 86 0 9	1 3 		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			01172006	Chg-P	CR2E034	(11/05)	
										
City & State			City & State			4. FEI Numb			Ar	optied For
			Hialenh,	7	65-114	6213		No	ot Applicable	
Zip		Country	Zip	Cour	ntry a	E Contificate	of Status Desired	_ \$	3.75 Add	ditional
		}	33012	10.	54	5. Cermone	or status Destreo		e Require	
	6. Name	and Address of Current	Registered Agent		T	7. Name and	Address of New I	Registered Ag	ent	
					Name					
PUJOL, CA	ARLOS									
3305 NW					Street Address (P.O. Box Number is Not Acceptable)					
MIAMI, FL	33147									
•		•								
		şi Ş			City			_	2 0	
		•			City			FL	Zip Cod	е
8 The shove	named enti	ty submits this statement fr	or the purpose of changing it	s register	art office or rec	Distance arrest or bo	th in the State of E	orida Lamitar	niling with	and annext
		tered agent.	or the perpose or thanging it	a regiolei	ac onice or reg	gistered agent, or be	nii, iii iiie olale Oi Fi	onua. Lamiai	mar with,	and accept
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SIGNATURE										
	Signature, types	d or printed harrie of registered agent	and fille if applicable. INO	TE: Registere	ed Agent agniture re	equired when reinstating)		DATE		
FII	E NOWIII	FEE IS \$150.00	9. Election Campa	aign Finai	ncing	\$5.00 May Be				
		6 Fee will be \$550.	oo Frust Fund Con	tribution.		Added to Fees				
	<u>- </u>									
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFF	FICERS AND D	RECTOR	3 IN 11
BILLE	Р		☐ Delete	☐ Delete MILE					Change	■ Addition
NAME	PUJOL, C	CARLOS			EC .					
STREET ADDRESS	3305 NW	79TH ST			ELT ADDRESS					
CHY-SI-ZIP	MIAMI, F	l. 33147			'-Si-ZIP					
	V					_				
TITLE	_ bolde							L	Change	Addition
NAME	HERNANDEZ, JUAN C				£					
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CITY - ST- ZIP	MIAMI, FL 33147				'-ST-ZIP					
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NAME				NAM	E			_		
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NAME				NASS					- v	- Addition
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Jan 1 Ga 163F	 			Cit	51.24					
TITLE			☐ Delete	TITL	E į				Change	Addition
NAME				NAM	E					
STRUET ADDRESS				SIR	TET ADDRESS					
CITY - ST- ZIP				CITY	-ST-ZIP					
12 I hereby r	certify that th	e information sumplied with	this filing does not qualify f	or the ev	emptane contr	gined in Chapter 119	Florida Statuton	Liuribar codife	that the :-	Mormation
indicated	on this repo	rt or supplemental report is	s true and accurate and that	mv siana	ture shalf have	the same legal effect	at as if made under	oath: that I am	an officer	or director
of the cor	poration or t	he receiver or trustee emp	overed to execute this repor with all other like empowered	t as requi	red by Chapte	r 607, Florida Statute	es; and that my nan	e appears in B	lock 10 or	Block 11 if
viangeu,	or orran an	1			/)	Δ	1 1			
			- 1	, ,		4 .11 .	7. 1			

SIGNATURE AND TYPED OR PRINTED TAME OF SIGNING OFFICER OR DIRECTOR

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