

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000014844**

1. Entity Name

SIBONEY INVESTMENT GROUP, INC.



Principal Place of Business

10740 S.W. 24 ST.  
MIAMI, FL 33165 US

Mailing Address

P.O. BOX 55-8365  
MIAMI, FL 33255



04222006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

01-0651190

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

EGUSQUIZA, JOHN E  
9130 SOUTH DADELAND BLVD  
SUITE 1209  
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

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

(NOTE: Registered Agent signature required when re-registering)

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	P
NAME	ALONSO, ENRIQUE
STREET ADDRESS	10740 S.W. 24 STREET
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	VP
NAME	ALONSO, ENRIQUE JR
STREET ADDRESS	10740 SW 24 STREET
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	S
NAME	ALONSO, ELENA
STREET ADDRESS	10740 SW 24 STREET
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	T
NAME	ALONSO, GRISEL
STREET ADDRESS	10740 SW 24 STREET
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1000000539811  
05/09/06-80116-006 150.00

**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

Date

Daytime Phone #

Enrique Alonso, President