2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000029273

Entity Name: AYARAY ENTERPRISES, INC.

FILED May 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4401 AKITA DRIVE 5402 TURTLE CROSSING LOOP

TAMPA, FL 33624 TAMPA, FL 33625

Current Mailing Address: New Mailing Address:

5402 TURTLE CROSSING LOOP 4401 AKITA DRIVE

TAMPA, FL 33624 TAMPA, FL 33625 US

FEI Number: 03-0400316 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CASTRO, FALCONERY CASTRO, FALCONERY 4401 AKITA DRIVE 5402 TURTLE CROSSING LOOP

TAMPA, FL 33624 TAMPA, FL 33625 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: FALCONERY CASTRO 05/10/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

RIVERA, GLORIA H Name: Name: RIVERA, GLORIA H 4401 AKITA DRIVE 5402 TURTLE CROSSING LOOP Address: Address:

TAMPA, FL 33625 US City-St-Zip: TAMPA, FL 33624 City-St-Zip:

Title: TD Title: TD () Delete (X) Change () Addition Name: ARIAS, EDWIN Name: ARIAS, EDWIN

4401 AKITA DRIVE 5402 TURTLE CROSSING LOOP Address: Address:

TAMPA, FL 33624 TAMPA, FL 33625 US City-St-Zip: City-St-Zip: Title:

Title: (X) Change () Addition () Delete SD CASTRO, FALCONERY CASTRO, FALCONERY Name: Name:

5402 TURTLE CROSSING LOOP 4401 AKITA DRIVE Address: Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33625 US

Title: () Delete Title: (X) Change () Addition ESPINOSA, RÓDRIGO ESPINOSA, RODRIGO Name: Name: Address: 4401 AKITA DRIVE Address: 5402 TURTLE CROSSING LOOP

City-St-Zip: City-St-Zip: TAMPA, FL 33624 TAMPA, FL 33625 US

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: GLORIA H RIVERA PD 05/10/2006