## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000065331

Entity Name: LA ESTANCIA ARGENTINA, CORP.

FILED Apr 19, 2006 Secretary of State

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

18851 NE 29TH AVE 18851 NE 29TH AVE

900 900

AVENTURA, FL 33180 AVENTURA, FL 33180 US

Current Mailing Address: New Mailing Address:

18851 NE 29TH AVE 18851 NE 29TH AVE

900

AVENTURA, FL 33180 US

FEI Number: 42-1541112 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:

ROTH, LEONARDO A ESQ
18851 NW 29TH AVE SUITE 900
18851 NE 29TH AVE

AVENTURA, FL 33180 US SUITE 900
AVENTURA, FL 33180 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: LEONARDO ROTH, ESQ. 04/19/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 KOJUSNER, CLAUDO
 Name:
 KOJUSNER, CLAUDIO

 Address:
 18851 NE 29TH AVE #900
 Address:
 18851 NE 29TH AVE #900

 City-St-Zip:
 AVENTURA, FL 33180
 City-St-Zip:
 AVENTURA, FL 33180 US

Title: VPT ( ) Delete Title: VPT (X) Change ( ) Addition Name: HORIGIAN, FERNANDO Name: HORIGIAN, FERNANDO

Address: 18851 NE 29TH AVE SUITE 900 Address: 18851 NE 29TH AVE SUITE 900 City-St-Zip: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180 US

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

 Name:
 KOJUSNER, GASTON
 Name:
 KOJUSNER, GASTON

 Address:
 18851 NE 29TH AVE SUITE 900
 Address:
 18851 NE 29TH AVE SUITE 900

 City-St-Zip:
 AVENTURA, FL 33180
 City-St-Zip:
 AVENTURA, FL 33180 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: CLAUDIO KOJUSNER PS 04/19/2006