2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 18, 2006 8:00 am Secretary of State 07-18-2006 90084 036 ***150.00

DOCUMENT # P02000084723 1. Entity Name LIL' A, INC.			07-18-2008 90084 036 *** 130.00			
Principal Place of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·	1 4009	99665		
221 NW 1ST AVE. MIAMI, FL 33128	221 NW 1ST AVE. Miami, Fl 33128		400	0000		
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2. Principal Place of Business	3. Mailing Address					
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Suite, Apt. #, etc.	Suite, Apt. #, etc.		07062006	Chg-P	CR2E034 (11/05)	
City & State, F/	City & State FloriD		4. FEI Number 16-1623	752	⊢+ ∸	plied For
2ip Country 115 A	33128	Country SA		f Status Desired	\$8.75 Add	litional
6. Name and Address of Current	Registered Agent		7. Name and A	ddress of New F	Registered Agent	
SCATAMACCHIA, RAFFAELE		Name				_
221 NW 1ST AVE		Street Address	Street Address (P.O. Box Number is Not Acceptable)			
MIAMI, FL 33128						
		City			FL Zip Cod	е
The above named entity submits this statement to	r the purpose of changing its r	agistered office or regist	ered agent, or both	in the State of Fl		and accept
the obligations of registered agent.	i the purpose of changing its to	agistered dirica or ragist	ered agent, or both	, ar ino State or th	onda. Tarritariina witt,	and accept
SIGNATURE				07	10/06	
Signalure, typed or printed name of registered agent	and title if applicable (NOTE	Registered Agent signature requi	red when reinstating)		Z ATE	
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	9. Election Campaig Trust Fund Contril		5.00 May Be ided to Fees			
10. 32 TO OFFICERS AND	DIRECTORS	11.	ADDITIONS/C	HANGES TO OFF	FICERS AND DIRECTOR	
NAME 2 - PAGE SCATAMACCHIA, RAFFAELE	Del ete	TITLE			☐ Change	☐ Addition
STREET ADDRESS 221 NW 1ST AVE.		STREET ADDRESS				
CITY-ST ZIR MIAMI, FL 33128		CITY-ST-ZIP				
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STREET ADDRESS 221 NW 1ST AVE.		STREET ADDRESS				
CITY-ST-ZIP MIAMI, FL 33128	<u>_</u>	STREET ADDRESS CITY-ST-ZIP				,
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I nereby certify that the information supplied with this filter 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:

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

40099665

JULY 10TH, 2006

Lil' A Inc. 221 NW 1st Miami, Fl 33128

REF: PO2000084723

DEAR FLORIDA DEPARTMENT OF STATE:

WITH ALL DUE RESPECT I AM SENDING THIS LETTER TO REQUEST YOUR DEPARTMENT TO WAIVE THE LATE FEE TO RENEW OUR PROFIT CORPORATION. SINCE LAST YEAR, AFTER THE HURRACAINES MY HUSBAND AND I BEEN HAVING MONEY PROBLEMS, BECAUSE WE LOST A LOT OF MONEY AND WE DIDN'T RECEIVED ANY HELP FROM ANY GOVERNMENT ENTITY. WE RECEIVED THE CARD TO RENEW IT, BUT A DIDN'T KNOW THAT WE HAD TO DO IT BEFORE MAY. ALSO I WENT TO THE INTERNET AND I COULDN'T DO IT, BECAUSE I AM TERRIBLE WITH THE COMPUTERS AND THE WEEKS PASS BY AND TRYING TO CALL YOU IT WAS REALLY A CHALANGE. FINALLY I DID TALK WITH ONE OF YOUR REPRESENTATIVES AND SHE HELPED ME OUT AND DID SEND ME THIS APPLICATION, I WANT TO ASK YOU TO WAIVED THE LATE FEE, BECAUSE I CAN NOT AFFORD IT, I AM HAVING MONEY PROBLEMS WITH MY BUSINESS THAT IS IN DOWN TOWN MIAMI. AND IS OPEN JUST 4 HOURS PER DAY. YOU DON'T KNOW HOW MUCH MONEY WE LOST DURING THE HURRACAINES, TIME THAT WE WERE CLOSED, FOOD, AND THE LITTLE MONEY THAT I AM MAKING IS TO SURVIVE AND TO DON'T END UP LOSSING EVERYTHING. I HOPE THAT YOU CAN HELP ME AND I WILL REALLY APPRECIATE IT.

SINCEREL

ELSA VIRGINIA SCATAMACCHIA

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