## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## May 01, 2006 08:00 AM Secretary of State DOCUMENT # P02000101963 AQUARELA HOMES, INC. Mailing Address Principal Place of Business 8000 WEST 24TH AVENUE 8000 WEST 24TH AVENUE BAY 1 HIALEAH, FL 33016 HIALEAH, FL 33016 No Cha-P CR2E034 (11/05) 04282008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2722466 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 9. Name and Address of Current Registered Agent RODRIGUEZ, EDUARDO L DO NOT WRITE 8000 WEST 24TH AVENUE BAY 1 IN THIS SPACE HIALEAH, FL 33016 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 Squarure, typed or printed name of registered agent and the 4 approache. (NOTE: Registered Agent agreeture required when remains ing) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 16. 3073 F RODRIGUEZ, EDUARDO L MAME STREET ADDRESS 6000 WEST 24TH AVENUE BAY 1 000000551889 05/13/86-80118-011 150,00 EFTY-ST-ZP HIALEAH, FL 33016 BBE MAME STREET ADDRESS CHY-ST-ZP RRE NAME STREET ADDRESS DO NOT WRITE DTY-ST-ZIP IN THIS SPACE SCANAC STREET ADORESS ETTY-ST- 7P

12. Thereby certify that the information supplied with this filling 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 of the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with all address, with all other like empowered.

SIGNATURE:

ULLE STREET ADDRESS CXTY-ST-20 3377.0 NAME STREET ADDRESS CITY-ST-70°

> PRES STUMATURE AND TYPEU OR FRINTED RUME OF SIGNING OFFICER OR DIRECTOR

4-28-06 Daysona Phone 2

FILED