2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 05, 2006 08:00 AM Secretary of State DOCUMENT # P02000102472 1. Entity Name NANCO IMPORT & EXPORT CORPORATION Principal Place of Business Malling Address 600 N.E. 36TH STREET 600 N.E. 36TH STREET #604 #604 MIAMI, FL 33137 MIAMI, FL 33137 01032006 No Chg-P CR2E034 (11/05) 50 NOT WRITE IN THIS SPACE 4. FEI Number Applied For 55-0798482 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BLANCO, BETTY ESQ. **90 NOT WRITE** 1801 CORAL WAY SUITE 408 IN THIS SPACE MIAMI, FL 33145 5. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flonda. 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 remainting) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 20 TIRLE SEIXAS, VICTOR N NAME STREET ADDRESS 600 N.E. 36TH STREET U00000492281 MIAMI, FL 33137 CITY-ST-2/P 04/19/06-80058-023 150.b0 TITLE NAME STITLET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-71P 717t F IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby 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 supplier white its 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 comporation or the receiver of fluidide 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 all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-TIP TITLE NAME STREET ADDRESS CITY-ST-TIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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