

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003293

Entity Name: L.A. JUNIOR CORPORATION

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

8454 NW 8 STREET  
APT 11  
MIAMI, FL 33126

## New Principal Place of Business:

## Current Mailing Address:

8454 NW 8 STREET  
APT 11  
MIAMI, FL 33126

## New Mailing Address:

FEI Number: 59-3764765      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PENA, LUIS  
8454 NW 8 ST.  
APT. 11  
MIAMI, FL 33126 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: PENA, LUIS  
Address: 8454 NW 8 ST.,APT. 11  
City-St-Zip: MIAMI, FL 33126

Title: VP ( ) Delete  
Name: OSORIO, LUIS FERNANDO  
Address: 1155 BLIKELL BAY DRIVE  
City-St-Zip: MIAMI, FL 33131

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: OSORIO, LUIS FERNANDO  
Address: 1155 BRICKELL BAY DRIVE  
City-St-Zip: MIAMI, FL 33131

Title: DIR ( ) Change (X) Addition  
Name: GUTIERREZ, CLAUDIA M  
Address: 8454 NW 8ST #11  
City-St-Zip: MIAMI, FL 33126

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: LUIS M. PENA

DPS

04/28/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date