



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 30, 2006 08:00 AM
Secretary of State**

DOCUMENT # P03000020198			
1. Entity Name GANDARA MARINE ENTERPRISES INC.			
Principal Place of Business 600 N.W. 7TH AVE. MIAMI, FL 33136-3104		Mailing Address 600 N.W. 7TH AVE. MIAMI, FL 33136-3104	
DO NOT WRITE IN THIS SPACE			
		01172006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 01-0769290	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
GANDARA, GAUDALUPE 600 N.W. 7TH AVE. MIAMI, FL 33136-3104		DO NOT WRITE IN THIS SPACE	
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		U00000407703 02/08/06-80032-005 150.00	
10. OFFICERS AND DIRECTORS			
TITLE	P		
NAME	GANDARA, PEDRO		
STREET ADDRESS	600 N.W. 7TH AVE.		
CITY-ST-ZIP	MIAMI, FL 331363104		
TITLE	VP		
NAME	GANDARA, GUADALUPE		
STREET ADDRESS	600 N.W. 7TH AVE.		
CITY-ST-ZIP	MIAMI, FL 331363104		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing 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 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			
Date: _____ Daytime Phone #: _____			