


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 23, 2006 8:00 am**  
**Secretary of State**

01-20-2006 90025 008 \*\*\*158.75

<b>DOCUMENT # P03000021943</b>	
1. Entity Name <b>5505 N. HABANA CORPORATION</b>	

Principal Place of Business <b>11968 N FLA AVE TAMPA, FL 33612</b>	Mailing Address <b>11968 N FLA AVE TAMPA, FL 33612</b>
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DO NOT WRITE IN THIS SPACE



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>74-3080505</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>FUENTES, LAWRENCE E 1407 W BUSCH BLVD TAMPA, FL 33612</b>
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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 *Lawrence E. Fuentes* (NOTE: Registered Agent signature required when retesting) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D DIGERLANDO, JOSEPH 11968 N FLA AVE TAMPA, FL 33612</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D PÉREZ, CARMEN E 11968 N FLA AVE TAMPA, FL 33612</b>
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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: *Carmen E. Perez* \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT

66002/38

FEB 13 2006

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 25, 2006

5505 N. HABANA CORPORATION  
11968 N FLA AVE  
TAMPA, FL 33612

Subject: **5505 N. HABANA CORPORATION**

Reference Number: **P03000021943**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cc

ANNUAL REPORTS SECTION