2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000022846

Entity Name: LIRBAN AMERICA ENTERPRISES INC.

FILED Apr 14, 2006 Secretary of State

	iner Ordonitor	MENOZO ZIVI ZIVI PROZO, IIVO				
Current Principal Place of Business:			New Principal Place of Business:			
4055 SW ⁻ MIAMI, FL	103 AVENUE 33165					
Current Mailing Address:			New Mailing Address:			
P.O. BOX MIAMI, FL	655335 332655335					
FEI Number: 14-1869861 FEI Number Applied For ()			FEI Number Not App	FEI Number Not Applicable () Certificate of Status Desired ()		
Name and	d Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
	ANTONIO 103 AVENUE 33165 US					
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing	its registered	office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	c Signature of Registered Ag	ent		Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	P () UGALDE, ANTO 4055 SW 103 A MIAMI, FL 3316	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MANNINGS, AIS	DRIVE-APT 11-K	Title: Name: Address: City-St-Zip:	V (MANNINGS, A 19070 NW 18 MIAMI, FL 33	6 STREET	
Title: Name: Address: City-St-Zip:	OGUALANA, TÚ 1801 S. OCEAN	Delete NDE DRIVE APT. 833 EACH, FL 33009	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () UGALDE, JOSE 4055 SW 103 A MIAMI, FL 3316	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	()	Delete	Title: Name: Address:	GM (TAVERNIER, 2750 NW 172		

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.

City-St-Zip: MIAMI, FL 33056

SIGNATURE: ANTONIO UGALDE P 04/14/2006

City-St-Zip: