2006 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

SIGNATURE

Feb 15, 2006 08:00 AM **DOCUMENT # P03000041860** Secretary of State 1. Entity Name ALMEIDA ENTERPRISE, INC. Mailing Address Principal Place of Business 11483 SW 181 STREET 11483 SW 181 STREET MIAMI, FL 33157 MIAMI, FL 33157 No Cha-P CR2E034 (11/05) 02072006 DO NOT WRITE IN THIS SPACE Applied For 4. FEt Number 16-1661975 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П 5. Name and Address of Current Registered Agent ALMEIDA, JOSE LUIS DO NOT WRITE 11483 S.W. 181 ST. PERRINE, FL 33157 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 DATE Signature, typed or printed name of registered agent and title it applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIR FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME ALMEIDA, JOSE LUIS 11252 SW 189 LN STREET ADDRESS Caty-St-Zap PERRINE, FL 33157 7171.E NAME U00000438951 SHILLI ADDRESS 113/01/06-80026-014 150.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP UJLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Stafutes. 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 a raddress, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE LUIS ALMEIDA PRESIDENT

02-07-06

305-216-0059

Daytima Phone &

FILED