


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000044434 1. Entity Name SPANGLISH ADVERTISING CORP	
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Principal Place of Business 2025 BAY DRIVE APT 9 MIAMI BEACH, FL 33141	Mailing Address 2025 BAY DRIVE APT 9 MIAMI BEACH, FL 33141
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01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 02-0687984	Applied For Not Applicable
5. Certificate of Status Paid <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent IRAZOQUI, IGNACIO J 2025 BAY DRIVE APT 9 MIAMI BEACH, FL 33141
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**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 re-stating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO IRAZOQUI, IGNACIO J 2025 BAY DRIVE, APT 9 MIAMI BEACH, FL 33141
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02/01/06-80032-005 150.00

**DO NOT WRITE
IN THIS SPACE**

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** **01/13/06** **(305) 244 0918**
Date Daytime Phone #