
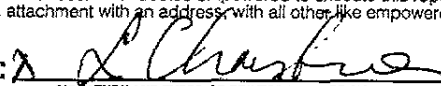


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000052415 1. Entity Name CHRIS ANDRES, INC.		
Principal Place of Business 462 NE 210 CIRCLE TERR., #203 MIAMI, FL 33179	Mailing Address 462 NE 210 CIRCLE TERR., #203 MIAMI, FL 33179	
<h2 style="margin: 0;">DO NOT WRITE IN THIS SPACE</h2>		
6. Name and Address of Current Registered Agent CHRISTIAN, LAVERN 462 NE 210 CIRCLE TERR., #203 MIAMI, FL 33179		
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) <small>Signature, typed or printed name of registered agent and title if applicable</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000520472 05/02/06-80096-015 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHRISTIAN, LAVERN 462 NE 210 CIRCLE TERR., #203 MIAMI, FL 33179	
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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:  <div style="float: right; text-align: right;"> 7/20/2006 Date 305 65249047 Daytime Phone # </div>		



02202006 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0691715	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

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