## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000115177

PABLO, JUAN B

660 NW 123 AVE.

MIAMI, FL 33182

Name: Address:

City-St-Zip:

FILED Apr 30, 2006 Secretary of State

Entity Nar	ne: PREMIL	IM INTERNATIONAL SUPPLIE:	S, CORP.				
Current Principal Place of Business:				New Principal Place of Business:			
15770 SW 105 LANE MIAMI, FL 33196				111 ANTIQUERA AVE SUITE # 2 CORAL GABLES, FL 33134			
Current Mailing Address:				New Mailing Address:			
15770 SW 105 LANE MIAMI, FL 33196				111 ANTIQUERA AVE SUITE # 2 CORAL GABLES, FL 33134			
FEI Number:	73-1683780	FEI Number Applied For ( )	FEI Numbe	r Not Appli	icable ( )	Certificate of Status De	sired (X)
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
FERRER, PABLO 15770 SW 105 LANE MIAMI, FL 33196 US				FERRER, PABLO 111 ANTIQUERA AVE SUITE # 2 CORAL GABLES, FL 33134 US			
The above in the State	named entity of Florida.	submits this statement for the p	purpose of ch	nanging it	ts registered	office or registered age	ent, or both,
SIGNATURE:				04/30/2006			
	Electro	onic Signature of Registered Ag	ent			Date	
Election Can	npaign Financii	ng Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DP ( FERRER, PAI 15770 SW 10 MIAMI, FL 33	5 LANE	Ade	le: me: dress: y-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TORRES, CAI	I PHI, EL PARAISO	Ade	le: me: dress: y-St-Zip:	CASADO, AN 111 ANTIQUE		
Title: Name: Address: City-St-Zip:	UZCATEGUI,	ZI, PH1, EL PARADISO	Ade	le: me: dress: y-St-Zip:	(	( ) Change ( ) Addition	
Title:	D (	) Delete	Titl	le:	(	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PABLO FERRER VΡ 04/30/2006