

FROM : Stan Strickland, Inc.

PHONE NO. : 954 698 5927

Mar. 13 2006 04:33PM P2

FILED**Mar 16, 2006 08:00 AM**
Secretary of State**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000136241 1. Entity Name MILTON ROBINSON, INC.	
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Principal Place of Business 1551 SW 21ST ST BOCA RATON, FL 33486	Mailng Address 1551 SW 21ST ST BOCA RATON, FL 33486
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03132005 No Chg-P CR2E034 (11/05)

4. FEI Number 54-2132650	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent ROBINSON, MILTON 1551 SW 21ST ST BOCA RATON, FL 33486

**DO NOT WRITE
IN THIS SPACE**

6. 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 Milton Robinson MILTON ROBINSON Mar 13, 2006
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when resigning) DATE**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fee

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT ROBINSON, MILTON 1551 SW 21ST ST BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARRERO, RODOLFO 340 SW 2ND ST. BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARRERO, CARLOS 804 SW 21ST ST BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/25/06-80011-013-150.00**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: Milton Robinson MILTON ROBINSON
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR