


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P04000015071  
 1. Entity Name  
 TONY LIGHTNING, INC.



Principal Place of Business      Mailing Address  
 11931 SW 131 AVE      11931 SW 131 AVE  
 MIAMI, FL 33186      MIAMI, FL 33186

**DO NOT WRITE IN THIS SPACE**



04272006      No Chg-P      CR2E034 (11/05)

4. FEI Number      Applied For  
 20-0655877      Not Applicable

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 GONZALEZ, MARIA  
 11931 SW 131 AVE  
 MIAMI, FL 33186

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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 Fees

U00000548059  
 05/12/06-80047-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GONZALEZ, MARIA
STREET ADDRESS	11931 SW 131 AVE
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	VD
NAME	GONZALEZ, ANTONINO
STREET ADDRESS	11931 SW 131 AVE
CITY-ST-ZIP	MIAMI, FL 33186
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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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 duly empowered.

SIGNATURE: Maria Gonzalez      Date: 4/28/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Daytime Phone #