

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000020789

**FILED**  
**Apr 04, 2006**  
**Secretary of State**

**Entity Name:** COPROSEA CORPORATION

**Current Principal Place of Business:**

737 N.E. 7 AVE  
APT # 4  
FORT LAUDERDALE, FL 33304

**New Principal Place of Business:**

**Current Mailing Address:**

400 N.E. 21 STREET  
APT # 7  
MIAMI, FL 33137

**New Mailing Address:**

5450 NW 114 AVE  
UNIT # 106  
MIAMI, FL 33178 EU

**FEI Number:** 20-0681458

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORLA, SUSAN  
400 N.E. 212 STREET  
APT # 7  
MIAMI, FL 33137 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MORLA, SUSAN  
Address: 400 N.E. 21 STREET, APT # 7  
City-St-Zip: MIAMI, FL 33137

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: RIVERO, PEDRO  
Address: 4955 NW 199 ST LOT 528  
City-St-Zip: OPALOCKA, FL 33055

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.

SIGNATURE: PEDRO RIVERO

P

04/04/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date