

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000043982

Entity Name: EL BOCON CORP

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

8300 WEST FLAGLER STREET
119
MIAMI, FL 33144 US

New Principal Place of Business:

PO BOX 228302
MIAMI, FL 33122 US

Current Mailing Address:

8300 WEST FLAGLER STREET
119
MIAMI, FL 33144 US

New Mailing Address:

PO BOX 228302
MIAMI, FL 33122 US

FEI Number: 20-0866877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALLARES, LUIS A
8300 WEST FLAGLER STREET
119
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

PALLARES, LUIS A
PO BOX 228302
MIAMI, FL 33122 US

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: LUIS A PALLARES

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PALLARES, LUIS A
Address: 8300 WEST FLAGLER STREET #119
City-St-Zip: MIAMI, FL 33144 US

Title: VP () Delete
Name: ALZATE, DORA C
Address: 8300 WEST FLAGLER STREET #119
City-St-Zip: MIAMI, FL 33144 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PALLARES, LUIS A
Address: PO BOX 228302
City-St-Zip: MIAMI, FL 33122 US

Title: VP (X) Change () Addition
Name: ALZATE, DORA C
Address: PO BOX 228302
City-St-Zip: MIAMI, FL 33122 US

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: LUIS A PALLARES

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date