

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 13, 2006 8:00 am**  
**Secretary of State**

09-13-2006 90002 015 \*\*\*150.00

<b>DOCUMENT # P04000053986</b> 1. Entity Name <b>FLORES'S FAMILY ENTERPRISE, INC.</b>					
Principal Place of Business <b>326 STERLING DRIVE WINTER HAVEN, FL 33881</b>			Mailing Address <b>326 STERLING DRIVE WINTER HAVEN, FL 33881</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State			
Zip <b>33884</b>	Country <b>U.S.</b>	Zip <b>33884</b>	Country <b>U.S.</b>	4. FEI Number <b>04-3788386</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>FLORES, OMAR R 326 STERLING DRIVE WINTER HAVEN, FL 33881</b>				7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 15, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLORES, OMAR 326 STERLING DRIVE WINTER HAVEN, FL 33881		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FUENMAYOR, MALENA 326 STERLING DRIVE WINTER HAVEN, FL 33881		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLORES, MALENA 3761 SW 59 TERRAE APT. 206 DAVIE, FL 33314		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLORES, OSCAR E 797 NW 151 AVENUE PEMBROKE PINES, FL 33028		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.					
<b>SIGNATURE:</b> <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <b>9-08-06</b> Daytime Phone <b>(863) 324-4767</b>	

ATTACHMENT  
60038881

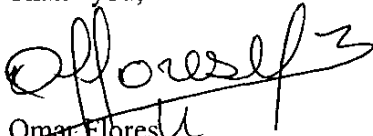
September 1, 2006

Re: Document # P04000053986  
Flores's Family Enterprise, Inc.  
326 Sterling Drive  
Winter Haven, FL 33884

To Whom It May Concern:

Please note that we never received the notice by mail of the deadline for the renewal of the corporation because the zip code that you have on records is wrong. We just recently received the intent of Dissolution thanks to the post office forwarding. I am requesting for you to waive the 400 dollar penalty for it is the first time that this happened to us.

Thank you,

A handwritten signature in cursive script that reads "Omar Flores" followed by a stylized flourish.

Omar Flores  
President