2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 14, 2006 8:00 am Secretary of State

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DOCUMENT # P0400058949 1. Entity Name FLORIDA FIRST USA, CORP.					06-14-2006 90004 043 ***150.00				
Principal Plac	e of Business	Mailing Address	•	i					
1337 WEST SUITE 407 HIALEAH, FL	49TH PLACE	1337 WEST 49TH PLACE SUITE 407 HIALEAH, FL 33012			4	0095458			
HIALEAN, FL	. 33012	MINLEAN, FL 33012							
126	East 15th St	. Mailing Address	15th 5	7					
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			05312006	Chg-P	CR2E03	4 (11/05)	
City & Stat	te la transfer la company	City & State	A		4. FEI Numbe				plied For
THAY	CONTROL TO THE COUNTRY OF THE COUNTR	FICTON 17	CORVE	S	75-315			No 8.75 Add	t Applicable
088	200 Miami Dase	33010 M	1 maril	S	5. Certificate	of Status Desired		ee Required	
	6. Name and Address of Current Reg	istered Agent	Name.	7	7. Name and	Address of New I	Registered A	gent	
VILLEGAS, LUIS H				<u> 131</u>	LEG	LAS, L	<u> 2 i U -</u>	<u>#.</u>	
1337-WEST 49TH PLACE SUITE 407				dress (I	P.O. Box Numb	erris Not Acceptabl	JL 51	rree	\mathcal{A} .
	/ FL 33012					,		,	J
				ri a	le al	h	FL	Zin Code	010
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent.									
ino obligationo o rogiolo o agoriti.									
SIGNATURE									
		9. Election Campaign F	Eigangleg	¢E	00				
	LE NOW!!! FEE IS \$550.00 ue by September 6, 2006	Trust Fund Contribut			.00 May Be ed to Fees				
10.	OFFICERS AND DIR	ECTORS	11,	·	ADDITIONS	CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11
TITLE	PD	☐ Delete	TITLE	Q Z		20.		Change	Addition
NAME	VILLEGAS, LUIS H		NAME CIPEL ADDRESS	iv	776	-H2, M	7157	<i>t t</i>	
STREET ADDRESS CITY-ST-ZIP	1337 WEST 49TH PLACE HIALEAH, FL 33012		STREET ADDRESS CITY-ST-ZIP	$\mathcal{J}_{.j}$	10 150	12+12	33 01 W 71	reet	•
TITLE		☐ Delete	TITLE	177	W/SCV	141 4		☐ Change	Addition
NAME			NAME STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP						
THILE		☐ Delete	TITLE					☐ Change	Addition
NAME .			NAME STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP	\		CITY-ST-ZIP						
TITLE		☐ Delete	TITLE					☐ Change	☐ Addition
NAME OTRETT ARROSON			NAME STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE		•			☐ Change	☐ Addition
NAME STREET ADDRESS			NAME STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE					Change	Addition
NAME CERTET ADDRESS			NAME STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP						

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:

SIGNATU

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FLARIDA FIRST USA, CORP. 126 East 15th Street. Hialeah, Pl. 33010

June 12,2006 Florida Dept. of State. Division of Corporations P.S. BBX 1500 Talla Hasser, FL. 32302-1500

Subject: Florida First USA, Corp. CHange of appress

Due to the change of assect of my corporation to: 126 East 15 Street, Gov that I Have not Received the Annual Report Natice on time to SIND my REQUIRED payment of \$150,00 Because of this situation, I respectfully ask you to waire the purely of \$400.00 and I am enclosing with this Letter my payment check of \$150.00 For the present year 2006.

Very Trady yours,