


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 17, 2006 8:00 am**  
**Secretary of State**

01-17-2006 90244 014 \*\*\*150.00

<b>DOCUMENT # P04000059276</b>	
1. Entity Name <b>ARENA AZUL, INCORPORATED</b>	

00002337

Principal Place of Business <b>2021 NW 119 AVE PEMBROKE PINES, FL 33026</b>	Mailing Address <b>2021 NW 119 AVE PEMBROKE PINES, FL 33026</b>
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2. Principal Place of Business <b>301 Racquet Club Rd Suite, Apt. #, etc. 206</b>	3. Mailing Address <b>301 Racquet Club Road Suite, Apt. #, etc. 206</b>
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City & State <b>Weston, Florida</b>	City & State <b>Weston</b>
Zip <b>33326</b>	Country <b>Broward</b>



01102006 Chg-P CR2E034 (11/05)

4. FEI Number <b>81-0648055</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent <b>SANCHEZ, BLANCA A 2021 NW 119 AVE PEMBROKE PINES, FL 33026</b>	
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7. Name and Address of New Registered Agent Name <b>Marisol Aponte</b> Street Address (P.O. Box Number is Not Acceptable) <b>301 Racquet Club Road # 206</b> City <b>Weston</b> FL Zip Code <b>33326</b>	
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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 <b>Marisol Aponte, President</b>	DATE <b>1/10/06</b>

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P APONTE, MARISOL C 301 RACQUET CLUB ROAD, UNIT# 206 WESTON, FL 33326</b> <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	<b>V SANCHEZ, BLANCA A 2021 NW 119 AVE PEMBROKE PINES, FL 33026</b> <input checked="" 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	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	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<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.	
SIGNATURE: <b>Marisol Aponte</b>	DATE <b>1/10/06</b> DAYTIME PHONE # <b>954-383-4180</b>