2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000066020

1. Entity Name
AMPARO'S PLACE, INC.



Principal Place of Business

Mailing Address

13143 NW 42ND AVENUE OPA LOCKA, FL 33054 13143 NW 42ND AVENUE OPA LOCKA, FL 33054

FILED Mar 13, 2006 8:00 am Secretary of State

03-13-2006 90090 037 ***150.00

REFETIONS



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4. FEI Number Applied For 20-1051131 Not Applied ble

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

CARDOZO, AMPARO 13143 NW 42ND AVENUE OPA LOCKA, FL 33054

SIGNATURE:

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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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
		Election Campaign Finance Trust Fund Contribution.		\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS	<u> </u>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS CARDOZO, AMPARO 13143 NW 42ND AVENUE OPA LOCKA, FL 33054	,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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12. I hereby certify that the information supplied with this filling 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.							