## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000072896

Entity Name: RALPH CARRION, INC.

FILED Apr 26, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

3695 FOUNTAINBLEU BLVD 1735 TANGLEWOOD DR KISSIMMEE, FL 34746 US KISSIMMEE, FL 34746 US

Current Mailing Address: New Mailing Address:

3695 FOUNTAINBLEU BLVD 1735 TANGLEWOOD DR KISSIMMEE, FL 34746 US KISSIMMEE, FL 34746 US

FEI Number: 20-1080718 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARRION, RALPH
3695 FOUNTAINBLEU BLVD
KISSIMMEE, FL 34746 US

CARRION, RALPH
1735 TANGLEWOOD DR
KISSIMMEE, FL 34746 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: FRANK MARTINEZ 04/26/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 CARRION, RALPH
 Name:
 CARRION, RALPH

 Address:
 3695 FOUNTAINBLEU BLVD
 Address:
 1735 TANGLEWOOD DR

 City-St-Zip:
 KISSIMMEE, FL 34746 US
 City-St-Zip:
 KISSIMMEE, FL 34746 US

Title: S () Delete Title: S (X) Change () Addition
Name: CARRION RALPH
Name: CARRION RALPH
CARRION RALPH

Name:CARRION, RALPHName:CARRION, RALPHAddress:3695 FOUNTAINBLEU BLVDAddress:1735 TANGLEWOOD DRCity-St-Zip:KISSIMMEE, FL 34746 USCity-St-Zip:KISSIMMEE, FL 34746 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: RALPH CARRION P 04/26/2006