


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 01, 2006 8:00 am
Secretary of State

06-01-2006 90001 048 ***158.75

DOCUMENT # P04000089007
 1. Entity Name
SALVADOR CORPORATION IMPORT



Principal Place of Business 749 NW 23 ST MIAMI, FL 33127	Mailing Address 749 NW 23 ST MIAMI, FL 33127
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50020103



05192006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1228041	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ORTEGA, MARTHA
 2322 N.W. 7 COURT
 MIAMI, FL 33127

DO NOT WRITE IN THIS SPACE

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)
 Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ORTEGA, MARTHA 1249 SW 17 TR MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOMEZ, ROLANDO 1249 SW 17 TR MIAMI, FL 33145
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Martina Ortega* **MARTINA ORTEGA - PRESIDENT** 5-19-06 305-571-9413
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #