## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P04000097159

Entity Name: MANZANO BROTHERS, INC

FILED Jun 05, 2006 Secretary of State

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

3007 WIND MEADOW DR 40 11TH STREET

APT 203B # 98

GULF BREEZE, FL 32563 SHALIMAR, FL 32579

Current Mailing Address: New Mailing Address:

3007 WIND MEADOW DR 40 11TH STREET

APT 203B # 98
GULE REFETE EL 32563 SHALIMAR EL 32579

GULF BREEZE, FL 32563 SHALIMAR, FL 32579

FEI Number: 20-1298577 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:

MANZANO, MARIO MANZANO, MARIO 3007 WWIND MEADOW DR 40 11TH STREET

APT 203B # 98

GULF BREEZE, FL 32563 US SHALIMAR, FL 32579 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: MARIO MANZANO 06/05/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MANZANO, MARIO
 Name:
 MANZANO, MARIO

 Address:
 3007 WIND MEADOW DR. APT 203.B
 Address:
 40 11STREET #98

 City-St-Zip:
 GULF BREEZE, FL 32563
 City-St-Zip:
 SHALIMAR, FL 32579

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

 Name:
 COSTILLO, CARLOS
 Name:
 MANZANO, JOSE

 Address:
 3007 WIND MEADOW DR. APT 203.B
 Address:
 40 11TH STREET #98

 City-St-Zip:
 GULF BREEZE, FL 32563
 City-St-Zip:
 SHALIMAR, FL 32579

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

 Name:
 MANZANO, HECTOR
 Name:
 MANZANO, HECTOR

 Address:
 3007 WIND MEADOW DR. APT 203.B
 Address:
 40 11TH STREET #98

 City-St-Zip:
 GULF BREEZE, FL 32563
 City-St-Zip:
 SHALIMAR, FL 32579

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: MARIO MANZANO PRES 06/05/2006