## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## 04-24-2006 90361 015 \*\*\*150.00 DOCUMENT # P04000108725 LAICA USA CORP. Principal Place of Business Mailing Address 66016687 18911 COLLINS AVE **18911 COLLINS AVE** SUNNY ISLES, FL 33160 SUNNY ISLES, FL 33160 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04192008 CR2E034 (11/05) City & State 4. FEI Numbe City & State Applied For - 3413871 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MEDEI, RAUL G Street Address (P.O. Box Number is Not Acceptable) 18911 COLLINS AVE 2102 SUNNY ISLES, FL 33160 Zip Code 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 colligations of registered agent SIGNATURE. Signature, typed or printed name of registered agains and title if applicable (NOTE: Registered Agent signature required when remetating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 П Trust Fund Contribution. Added to Fee! 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PRES IME Delete TITLE Change Addition LEONI LANZ, NAPOLEON NAME NAME STREET ADORESS 18911 COLLINS AVENUE # 2102 STREET ADDRESS CITY-ST-ZIP SUNNY ISLES, FL 33160 City, St. 7ie VP TITLE Daketa TITLE ☐ Channe Addition ALEMAN, LUCELIS NAME MALE 18911 COLLINS AVENUE # 2102 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUNNY ISLES, FL 33160 City-St-7P Change TITLE Detete TITLE ☐ Addition NUME NAME STREET ADDRESS STREET ADDRESS CITY:ST-219 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE C Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-DP CITY-ST-ZIP 12. Thereby 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 amprovered 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. (305) 682797321st April 2006 SIGNATURE:

**FILED** 

May 17, 2006 8:00 am Secretary of State

NAPOLEON LEONI

IRS DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE P.O. BOX 9003

02637

HOLTSVILLE NY 11742-9003

COLOCIO ST

#PX1000108725

002637.201834.0011.001 2 MB 0.534 1322

Date of this notice: 09-21-2005

Employer Identification Number: 20-3413871

Form: SS-4

Number of this notice: CP 575 A

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

LAICO USA CORP 18911 COLLINS AVE APT 2102 SUNNY ISLES FL 33160

## WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an EIN. We assigned you EIN 20-3413871. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possible you should use your EIN and complete name and address shown above on all federal tax forms, payments and related correspondence. If this information isn't correct, please correct it using the tear off stub from this notice. Return it to us so we can correct your account. If you use any variation of your name or EIN, doing so could cause a delay in processing and may result in incorrect information in your account. Doing so could result in our assigning you more than one EIN.

Based on the information from you or your representative, you must file the following form(s) by the date shown next to it.

Form 1120

09/16/2005

After our review of your information, we have determined that you are delinquent for the tax period(s) dating as far back as 2004. Please file your return(s) by 10-06-2005 Penalties and interest will continue to accumulate from the due date of the return(s) until it is filed. If you were not in business or did not hire any employees for the tax period(s) in question, please file the return(s) showing you have no liabilities. If you need tax forms, you can call 1-800-829-3676 or you can download the forms from the IRS website at www.irs.gov.

If you have questions about the form(s) or the due date(s) shown, you can call us at 1-800-829-4933 or write to us at the address at the top of the first page of this letter. If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office or from our web site at www.irs.gov.

We assigned you a tax classification (S-Corporation, Partnership, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a determination of your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Revenue Procedure 98-01, 1998-1 I.R.B.7 (or superceding revenue procedure for the year at issue.)