

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000109268

FILED
Apr 12, 2006
Secretary of State

Entity Name: ACOSTA FAMILY ENTERPRISES INC.,

Current Principal Place of Business:

3096 BIANE STREET
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

3096 BIANE STREET
MIAMI, FL 33133

New Mailing Address:

FEI Number: 37-1493533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACOSTA, LESLEY
3096 BIANE STREET
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ACOSTA, RICHARD
Address: 3096 BLAINE STREET
City-St-Zip: MIAMI, FL 33133

Title: V () Delete
Name: ACOSTA-RODRIGUEZ, LUANY
Address: 1880 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33129

Title: MMBR () Delete
Name: ACOSTA, LESLEY A
Address: 3096 BLAINE STREET
City-St-Zip: MIAMI, FL 33133

Title: MMBR () Delete
Name: RODRIGUEZ, ALEXANDER A
Address: 1880 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LESLEY ACOSTA

MMRB

04/12/2006

Electronic Signature of Signing Officer or Director

Date