2006 FOR PROFIT CORPORATION

ANNUAL REPORT FILED **DOCUMENT # P04000113030** 06 APR 27 AH 11: 14 **BRENES CORPORATION** Principal Place of Business Mailing Address 9048 SW 157TH AVERD 9048 SW 157TH AVERD MIAMI, FL 33196--115 MIAMI, FL 33196--115 02122006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 56-2495746 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TOBAR, NESTOR R DO NOT WRITE 9048 SW 157TH AVE-RD MIAMI, FL 33196 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 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME TOBAR, NESTOR R 9048 SW 157TH AVE RD STREET ADDRESS 600074149196 05/08/06--01015--015 **450.00 CITY-ST-ZIP MIAMI, FL 33196 VΡ TITLE TOBAR, BRENDA L NAME STREET ADDRESS 9048 SW 157TH AVE RD MIAMI, FL 33196 CITY-ST-ZIP TITLE SEC TOBAR, DIANA L NAME STREET ADDRESS 9048 SW 157TH AVE RD DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33196 IN THIS SPACE TITLE TRE TOBAR, NESTOR R JR NAME STREET ADDRESS 9048 SW 157TH AVE RD CITY-ST-ZIP MIAMI, FL 33196 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 employed 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 er like empowered.

SIGNATURE:

STREET ADDRESS

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR