

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000113187

Entity Name: MY FAMILIA INC.

FILED
Sep 04, 2005
Secretary of State

Current Principal Place of Business:

3974 SW 129TH STREET
OCALA, FL 34473

New Principal Place of Business:

Current Mailing Address:

3974 SW 129TH STREET
OCALA, FL 34473

New Mailing Address:

FEI Number: 01-0818987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VAZQUEZ, RICHARD
3974 SW 129TH STREET
OCALA, FL 34473 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

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VAZQUEZ, EVELYN
Address: 3974 SW 129TH STREET
City-St-Zip: OCALA, FL 34473

Title: V () Delete
Name: VAZQUEZ, RICHARD
Address: 3974 SW 129TH STREET
City-St-Zip: OCALA, FL 34473

Title: ST () Delete
Name: POGGI, MARIA
Address: 3974 SW 129TH STREET
City-St-Zip: OCALA, FL 34473

Title: MD (X) Delete
Name: POGGI, SANTOS
Address: 3974 SW 129TH STREET
City-St-Zip: OCALA, FL 34473

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 Section 119.07(3)(i), 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: EVELYN VAZQUEZ

P

09/04/2005

Electronic Signature of Signing Officer or Director

Date