2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2006
Secretary of State

DOCUMENT# P04000118015

Entity Name: CARRANZA ENTERPRISE INTERNATIONAL, INC.

Current Principal Place of Business:

106 SWANNEE AVE
BRANFORD, FL 32008

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 179
BRANFORD, FL 32008

New Mailing Address:

FEI Number: 86-1113634 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MANGUAL, CARLOS
230 S HWY 129
BELL, FL 32619 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: CARRANZA, ANA M
Address: 240 SOUTH HWY 129
City-St-Zip: BELL, FL 32619

Title: VPST ( ) Delete
Name: GOMEZ, NELLY G
Address: 230 S HWY 129
City-St-Zip: BELL, FL 32619

Title: D ( ) Delete
Name: CARRANZA, WALTER
Address: 230 SO. HWY 129
City-St-Zip: BELL, FL 32619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/ST (X) Change ( ) Addition
Name: GOMEZ, NELLY G
Address: 230 SOUTH HWY 129
City-St-Zip: BELL, FL 32619

Title: D (X) Change ( ) Addition
Name: CARRANZA, ANA M
Address: 240 S HWY 129
City-St-Zip: BELL, FL 32619

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: NELLY G. GOMEZ P/ST 06/29/2006

Electronic Signature of Signing Officer or Director Date