

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2006 8:00 am**  
**Secretary of State**

03-29-2006 90124 031 \*\*\*150.00

**DOCUMENT # P04000128946**

1. Entity Name  
**MORALES PETROLEUM SERVICES, CORP.**



Principal Place of Business  
**8550 S.W. 109TH AVE #107  
MIAMI, FL 33173**

Mailing Address  
**8550 S.W. 109TH AVE #107  
MIAMI, FL 33173**

60066644

2. Principal Place of Business  
**8810 S.W. 132 PL**

3. Mailing Address  
**Suite, Apt. #, etc.  
304 DN**

City & State  
**MIAMI FL**

Zip  
**MIAMI - DAN**



02132006 Chg-P CR2E034 (11/05)

4. FEI Number  
**51-0524481**

Applied For  
**Not Applicable**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**ANTEPARA, LISBETH  
8550 S.W. 109TH AVE #107  
MIAMI, FL 33173**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
**8810 S.W. 132 PL # 304 DN**  
City **MIAMI** FL Zip Code **33186**

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 obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPT DE MORALES, FANNY L 8550 S.W. 109TH AVE #107 MIAMI, FL 33173 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	8810 S.W. 132 PL # 304 DN MIAMI FL 33186 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS ANTEPARA, LISBETH 8550 S.W. 109TH AVE #107 MIAMI, FL 33173 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	8810 S.W. 132 PL # 304 DN MIAMI FL 33186 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Fanny L. Demorales **FANNY L. DEMORALES** **PRESIDENT** **02/13/06 (305) 388-8631**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #