2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000133440



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### Addition #### Application of Business 2. Principal Place of Business Sule, Apl. 4. etc. Sule, Apl. 4. etc. Sule, Apl. 4. etc. City & State 1. Replication of Status Desirod Face Required Replication of Food Application of Status Desirod Face Required Replication of Food Application of Status Desirod Face Required Replication of Food Application of Status Desirod Face Required Replication of Food Application of Status Desirod Face Required Replication of Food Application of Status Desirod Face Required Replication of Food Application of Status Desirod Face Required Replication of Food Application of Status Desirod Face Required Replication of Food Application of Food Applicat	1. Entity Name							
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City & State Ci	2. Principal Place of Business		3. Mailing Address					
Zip Country Zip Country Size Size Size Size Size Size Size Size	Suite, Apt. #, etc.		Suite, Apt. #, etc.		03222006	Chg-P	CR2E034 (11/05)	ı
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Name Sitest Address (P.O. Box Number is Not Acceptable) City FL Zip Code City City City FL Zip Code City City City FL Zip Code City City City City City City City Cit		City & State City & State			1	209	1 -1-	
Name Street Address (P.O. Box Number is Not Acceptable)	Zip	Country	Zip	Country	5. Certificate o	f Status Desired		
LEDESMA, MARIA C 4876 NW 7TH ST MIAMI, FL 33128 8. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida, I am immitted with, and accept the the obligations of registered agent. SIGNATURE SIGNATURE FILE NOWILI FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 PSTD OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PSTD OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN MAKE SIRRET ADDRESS CITY-S1-2P TITLE MAKE SIRRET ADDRESS CITY-S1-2P TITLE Delete TITLE Delete TITLE Delete TITLE Delete TITLE Delete TITLE Delete TITLE MAKE SIRRET ADDRESS CITY-S1-2P Delete TITLE MAKE SIRRET ADDRESS CITY-S1-2P DELET TITLE M	6. Name and Address of Current Registered Agent			Name	7. Name and A	ddress of New R	legistered Agent	
The above named entity submits this statement for the purpose of changing its registered agent, or both. In the State of Florida. I am farmilliar with, and accept the obligations of registered agent agent. SIGNATURE	4876 NW 7TH ST				Street Address (P.O. Box Number is Not Acceptable)			
B. 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				City			FI Zip Coo	de
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ARTON May 1, 2006 Foe will be \$550.00 Trust Fund Contribution. Added to Fees 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PSTD LEDESMA, MARIA C 11899 SW 5TH ST MIAMI, FL 33184 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ADDITIONS/CHANGES TO CHANGE S TO CHANGE ADDITIONS ADDITIONS ADDITIONS CHANGE ADDITIONS CHA								
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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		portify that the information a malical with the	his filing dogs not qualify for	I	d in Chapter 119	Elorida Statutas	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 truetee 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 exercise or truetee empowered.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR

PRECIDENT