

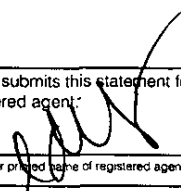
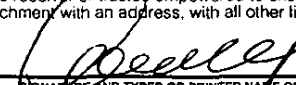


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90002 020 ***150.00

DOCUMENT # P04000134234					
1. Entity Name INTERNATIONAL FLORENCE INVESTMENTS, CORP.					
Principal Place of Business 3763 NE 208TH TERRACE AVENTURA, FL 33180 US			Mailing Address 3763 NE 208TH TERRACE AVENTURA, FL 33180 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 270 SW 133rd Court			
City & State		City & State Miami, FL 33184		02032006 Chg-P CR2E034 (11/05)	
Zip		Zip		4. FEI Number 20-1786694	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MAZZA-MARTINEZ, TANIA A MS. 9130 SOUTH DADELAND BLVD. 1600 MIAMI, FL 33156			7. Name and Address of New Registered Agent Name Luciana De La Fuente Street Address (P.O. Box Number is Not Acceptable) 3763 NE 208th Terrace City Aventura FL 33180		
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  DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P, S NAME CARMELINO, MARCO A MR. STREET ADDRESS 3763 NE 208 TERRACE CITY-ST-ZIP MIAMI, FL 33180	<input checked="" type="checkbox"/> Delete		TITLE PS NAME Alex Azcuy STREET ADDRESS 270 SW 133rd Court CITY-ST-ZIP Miami, FL 33184	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME DE LA FUENTE, LUCIANA MS. STREET ADDRESS 3763 NE 208 TERRACE CITY-ST-ZIP AVENTURA, FL 33180	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 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: 		Alex Azcuy 2-6-06		305-519-1127	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	