## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146336

Entity Name: FANTASY AROUND THE WORLD, CORP

FILED Mar 08, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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8180 NW 36 ST SUITE 304 MIAMI, FL 33166 8180 NW 36 ST SUITE 106 MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

8180 NW 36 ST SUITE 304 MIAMI, FL 33166 8180 NW 36 ST SUITE 106 MIAMI, FL 33166

FEI Number: 20-1787633 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 DUENAS, INGRID C
 DUENAS, INGRID C

 6500 MAIN ST
 14172 SW 54 STREET

 APT 10-108
 MIRAMAR, FL 33027 US

 MIAMI LAKES, FL 33014 US
 US

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: INGRID C DUENAS 03/08/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 DUENAS, INGRID C
 Name:
 DUENAS, INGRID C

 Address:
 6500 MAIN ST APT 10-108
 Address:
 14172 SW 54 STREET

 Address:
 6500 MAIN ST APT 10-108
 Address:
 14172 SW 54 STREE

 City-St-Zip:
 MIAMI LAKES, FL 33014
 City-St-Zip:
 MIRAMAR, FL 33027

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LINARES, ANGELA M
 Name:

 Address:
 9715 FOUNTAINEBLEAU BLVD STE E 303
 Address:

 City-St-Zip:
 MIAMI, FL 33172
 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: INGRID C DUENAS P 03/08/2006