

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000160957

1. Entity Name
CARABOBO INVESTMENT CORPORATION



Principal Place of Business
2655 LE JEUNE RD #507
CORAL GABLES, FL 33134

Mailing Address
2655 LE JEUNE RD #507
CORAL GABLES, FL 33134

BK

158.75
FILED
2006 JAN -6 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
41-2167549

☒ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FILINGS, INC.
3732-N.W. 16TH STREET
FT. LAUDERDALE, FL 33311-4132

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(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

100084020271
01/19/06--01010--001 **531.25

10. OFFICERS AND DIRECTORS

TITLE	ST
NAME	ROSSETTI, VICENTE
STREET ADDRESS	2655 LE JEUNE RD #507
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	P
NAME	VARGAS, JUAN CARLOS
STREET ADDRESS	2655 LE JEUNE RD #507
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	V
NAME	ROSSETTI, VINCENZO
STREET ADDRESS	2655 LE JEUNE RD #507
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 of 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

114106