

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2006 8:00 am**  
**Secretary of State**

04-20-2006 90177 002 \*\*\*150.00

DOCUMENT # P04000168561

1. Entity Name  
LAUDCEP ENTERPRISES, INC.



Principal Place of Business  
2525 SW 107TH COURT  
MIAMI, FL 33165

Mailing Address  
2525 SW 107TH COURT  
MIAMI, FL 33165

2. Principal Place of Business  
15650 SW 80th St  
Suite, Apt. #, etc.  
205

3. Mailing Address  
15650 SW 80th St  
Suite, Apt. #, etc.  
205

City & State  
MIAMI, FL

City & State  
MIAMI, FL

Zip  
33193

Country  
Dade

Zip  
33193

Country

04052006 Chg-P CR2E034 (11/05)

4. FEI Number  
20-2095838

Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

MARTINEZ, LAUDELINA  
3640 SW 19TH STREET  
MIAMI, FL 33145

## 7. Name and Address of New Registered Agent

Name  
CECILIA I PARRA

Street Address (P.O. Box Number is Not Acceptable)  
15650 SW 80th St #205

MIAMI, FL

City  
MIAMI

FL Zip Code  
33193

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]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04/05/06

**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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
MARTINEZ, LAUDELINA  
3640 SW 19TH STREET  
MIAMI, FL 33145 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
PARRA, CECILIA  
2525 SW 107TH COURT  
MIAMI, FL 33165 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DST  
URRIOLA, DANIEL E  
2525 SW 107TH COURT  
MIAMI, FL 33165 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MARTINEZ LAUDELINA  
3640 SW 19th St - SECRETARY  
MIAMI, FL 33145 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PARRA Cecilia  
15650 SW 80th St #205 - President  
MIAMI, FL 33193 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
URRIOLA Daniel E  
15650 SW 80th St #205 - President & TREASURER  
MIAMI, FL 33193 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ 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:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/05/06

Date

786-8539912

Daytime Phone #