

FILED
Apr 03, 2006 8:00 am
Secretary of State

3/1

03-17-2006 90142 009 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000000699			
1. Entity Name MENA ENTERPRISE CORP.			
Principal Place of Business 13401 SW 268TH TERR PRINCETON, FL 33032		Mailing Address 13401 SW 268TH TERR PRINCETON, FL 33032	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent MENA, MARIE 13401 SW 268TH TERR PRINCETON, FL 33032		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <i>Marie B. Mena</i> DATE <i>3-13-2006</i> Signature, typed or printed name of registered agent, and date if applicable. (NOTE: Registered Agent signature required when reinstating)			
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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MENA, MARIE 13401 SW 268TH TERR PRINCETON, FL 33032 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MENA, SANTIAGO 13401 SW 268TH TERR PRINCETON, FL 33032 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	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: <i>Marie B. Mena</i>		MARIE B. MENA 3/13/06 786-2776663 Signature and typed or printed name of signing officer or director Date Daytime Phone #	

66008257



03142006 Chg-P CR2E034 (11/05)

4. FEI Number *47-0949077* Applied For
Not Applicable

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