## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## May 31, 2006 8:00 am Secretary of State **DOCUMENT # P05000030622** 05-02-2006 90287 001 \*\*\*600.00 1. Entity Name 05-31-2006 90008 017 \*\*\*\*61.25 RUPÁNCO, INC. Principal Place of Business Mailing Address 201 S. BISCAYNE BLVD. 201 S. BISCAYNE BLVD. 50019984 34TH FLOOR 34TH FLOOR MIAMI, FL 33131 US MIAMI, FL 33131 2. Principal Place of Business 3. Mailing Address 4850 S.W. 72ND SAME Suite, Apt. #, etc. 05092006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For 202428625 MAIM Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 33155 U. S. A Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CONSTRUCTION IN C. FERRELL GROUP CORPORATE SERVICES, LLC Street Address (P.O. Box Number is Not Acceptable) 4850 5.W, 72ND AVE 201 S. BISCAYNE BLVD. 34TH FLOOR MIAMI, FL 33131 MIAMI 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. of registered agent. 05/09/06 (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Delete TITLE ת ☐ Change **Addition** TITLE CERVANTES PATRICIO NAME NAME 4850 S.W. 72 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 3315*5* MAIM. Addition TITLE ☐ Delete TITLE ☐ Change MARIA E. CERVANTES 4850 S.W. 72 NO AVE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33155 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS 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 attagrine my with an address, with all other like empowered. 05/09/06

**FILED**