2006 FOR PROFIT CORPORATION ANNUAL REPORT



FILED Apr 17, 2006 8:00 am Secretary of State

Principal Place of Business 2217 46TH STREET SW NAPLES, FL 34116 US 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Country Zip Country Zip Country S. Certificate of Status Desired 6. Name and Address of Current Registered Agent Name CHAVEZ, TOMAS J 2217 46TH-STREET SW NAPLES, FL 34116 Siteel Address (P.O. Box Number is Not Acceptable) City FL 8. The above named cnitry submits this statement for the purpose of changing its registered of fice or registered agent, or both, in the State of Florida. Lamine obligations of registered agent. SIGNATURE Signature typed or preed name of impaired agent agent and it in 4 applicable PLE NOWTH FEE IS \$150.00 After Biny 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND SIREH ADDRESS REGISTATURE CHAYEZ, TOMAS J SIREH ADDRESS 2217 46TH ST. SW	034 (11/05) A N \$8.75 Ad Fee Requin Agent	pplied For lot Applicable Iditional ed
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. O3272006 ChgP CR2E(City & State City & State 4. FEI Number 20 - 2 4 3 1 9 5 7 Zip	034 (11/05) A N \$8.75 Ad Fee Requin Agent	pplied For lot Applicable Iditional ed
City & State Country Street Address of New Registered Barne Name City City FL City City FL City City FL City FL City C	\$8.75 Ad Fee Requin	opplied For lot Applicable Iditional ed
CHAVEZ, TOMAS J 2217 46TH-STREET SW NAPLES, FL 34116 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 the obligations of registered agent. SIGNATURE Supriture typed or printed name of repusered apent and lite if applicable (NOTE Registered Agent signature required when rentisting) PLATE FILE NOW!!! FEE IS \$150.00 After Early 1, 2006 Fee will be \$550.00 P. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. Certificate of Status Desired 16. Name 17. Name and Address of New Registered Name 18. Name 18. Address (P.O. Box Number is Not Acceptable) 18. City 18. 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 the obligations of registered agent, or both, in the State of Florida. I am the obligations of registered agent. 19. Election Campaign Financing 19. Election Campaign Financing 19. Election Campaign Financing 29. El	\$8.75 Ad Fee Requin	lot Applicable Iditional ed
CHAVEZ, TOMAS J 2217 46TH-STREET SW NAPLES, FL 34116 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 the obligations of registered agent. SIGNATURE Supriture typed or printed name of repusered apent and lite if applicable (NOTE Registered Agent signature required when rentisting) PLATE FILE NOW!!! FEE IS \$150.00 After Early 1, 2006 Fee will be \$550.00 P. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. Certificate of Status Desired 16. Name 17. Name and Address of New Registered Name 18. Name 18. Address (P.O. Box Number is Not Acceptable) 18. City 18. 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 the obligations of registered agent, or both, in the State of Florida. I am the obligations of registered agent. 19. Election Campaign Financing 19. Election Campaign Financing 19. Election Campaign Financing 29. El	Agent Zip Coc	de
CHAVEZ, TOMAS J 2217 46TH-STREET SW NAPLES, FL 34116 Street Address (P.O. Box Number is Not Acceptable) City FL 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. Lamithe obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when remistring) DATE FILE NOW!!! FEE IS \$150.00 After thay 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 TILE NAME CHAVEZ, TOMAS J	Zip Coo	
CHAVEZ, TOMAS J 2217 46TH-STREET SW NAPLES, FL 34116 City City FL 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 the obligations of registered agent. SIGNATURE Street Address (P.O. Box Number is Not Acceptable) FILE Nowiti FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 9. Election Campaign Financing Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	_ `	
City FL 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. 1 am the obligations of registered agent. SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE Regestered Agent signature required when remissting) P. Election Campaign Financing Trust Fund Contribution. 9. Election Campaign Financing Added to Fees Added to Fees Added to Fees Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND TRUST FUND CHAVEZ, TOMAS J 13. CHAVEZ, TOMAS J	_ `	
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 the obligations of registered agent. SIGNATURE Signature: Typed or printed name of registered agent and title if applicable: (NOTE: Registered Agent signature required when remissting) DATE FILE NOWILI FEE IS \$150.00 After Earl 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. DEFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND TITLE NAME CHAVEZ, TOMAS J	_ `	
The obligations of registered agent. SIGNATURE Signature: typed or printed name of registered agent and title if applicable: (NOTE Registered Agent signature required when rensisting) DATE FILE NOW!!! FEE IS \$150.00 After Early 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND TITLE NAME CHAVEZ, TOMAS J	n familiar with	, and accept
File Now!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE P CHAVEZ, TOMAS J ONE Registered Agent signature required when renstating) 9. Election Campaign Financing Trust Fund Contribution. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TITLE NAME NAME		
File Now!!! FEE IS \$150.00 After Early 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND TITLE NAME P CHAVEZ, TOMAS J 9. Election Campaign Financing Trust Fund Contribution. 11. ADDITIONS/CHANGES TO OFFICERS AND TITLE NAME		
After Eny 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND TITLE P Delete TITLE NAME CHAVEZ, TOMAS J		
TITLE P DELETE DITLE NAME CHAVEZ, TOMAS J DELETE NAME		
NAME CHAVEZ, TOMAS J NAME	D DIRECTOR	RS IN 11
CITY-ST-ZIP NAPLES, FL 34116 CITY-ST-ZIP	☐ Change	☐ Addition
	☐ Change	Addition
TITLE S Delete TITLE MAME MENDEZ, JOEL M NAME STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34112 TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	☐ Change	Addition
TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	☐ Change	Addition
TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP	☐ Change	Addition
TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	Change	Addition

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.

Tomas Chavez 3-30-06 239.410-2756
SIGNING OFFICER OR DIRECTOR

Date

Description of The D