


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2006 8:00 am
Secretary of State

06-30-2006 90001 036 ***150.00

DOCUMENT # P05000034370	
1. Entity Name OCTOPOOLS, CORP	

Principal Place of Business 4754 SW 163RD PLY MIAMI, FL 33185	Mailing Address 4754 SW 163RD PLY MIAMI, FL 33185
---	---

40097565



2. Principal Place of Business 7868 SW 166 PL Suite, Apt. #, etc.	3. Mailing Address 7868 SW 166 PL Suite, Apt. #, etc.
---	---

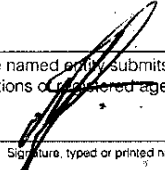
06262006 Chg-P CR2E034 (11/05)

City & State MIAMI FL	City & State MIAMI FL
Zip 33193	Country DADE

4. FEI Number 20-2453786	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ANZOLA, ANDRES 4754 SW 163RD PLY MIAMI, FL 33185


7. Name and Address of New Registered Agent Name NERIO ISAAC LOPEZ Street Address (P.O. Box Number is Not Acceptable) 7868 SW 166 PL 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:  DATE: 6-27-06

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
---	---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANZOLA, ANDRES 4754 SW 163RD PLY MIAMI, FL 33185 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> LOPEZ, NERIO ISAAC 4754 SW 163RD PLY MIAMI, FL 33185 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CROPEZA, MANUEL 4754 SW 163RD PLY MIAMI, FL 33185 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P- LOPEZ NERIO ISAAC 7868 SW 166 PL MIAMI FL 33193 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> <input type="checkbox"/> Change <input type="checkbox"/> 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, 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: 	6-27-06 (305) 370-5490
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

ATTACHMENT

40097565

JUNE 27, 2006.

FLORIDA DEPARTMENT OF STATE
Division of Corporation
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Corporate Annual Fee # P05000034370

Dear Secretary of State:

The Purpose of this letter is to request an exemption of penalty for late payment year 2006 according with Uniform Business Report of **OCTOPOOLS, CORP.,**
a Florida Corporation.

I have not paid Annual Fee Corporation on time because I, don't received the corporate annual report, however I, want to hold the name for my small business, I have attached annual fee payment check for amount of \$ 150.00.

Should you have any question regarding this matter, please call me at telephone number (305) 370-5490

Sincerely,

OCTOPOOLS, CORP



NERIO ISAAC LOPEZ
Vice-President