2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 14, 2006 8:00 am Secretary of State

| | | | | | | . , O | uic |
|---|---|---------------------------------|--|------------------------------|--------------------------------|------------------------|-------------------------------|
| DOCUMENT # P05000050339 1. Entity Name ELECTRO DEPOT, INC. | | | | | 03-14-2006 90023 012 ***150.00 | | |
| Principal Plac | ce of Business | Mailing Address | | | 1. | | |
| 8858 W. FLA | | 8858 W. FLAGLER ST | | | • | | |
| 208 | NOLEK 31. | 208 | • | | | | |
| MIAMI, FL 3 | 33174 | MIAMI, FL 33174 | | 1 | | | |
| 1 | | • | | | | | |
| Principal Place of Business Address Address | | | | | | | |
| 15265 SW 8 WAY 15265 SW | | | N 8 WA | 4 | | ** ==== === === *** | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | 03112006 | Chg-P | CR2E034 (11/0 | 5) |
| City & Sta | <i>F</i> ., | City & State M(A) | FL | 4. FEI Numb | 08325 | -97 | Applied For Not Applicable |
| Zip | Country | Zip c | Country | | | \$8.75 | |
| 33/9 | 74 | 33194 | , | 5. Certificate | e of Status Desired | Fee Requ | |
| | 6. Name and Address of Current | Registered Agent | | 7. Name and | Address of New F | legistered Agent | |
| | | | Name | | | | |
| | SALDIVAR, NICOLASINA | - | | | | | |
| 1 | LAGLER ST. | Street Add | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| 208 | | | | | | | |
| MIAMI, FL 33174 | | | | | | | |
| | | | City | | | FL Zip C | ode |
| 8. The above | named entity submits this statement for | or the purpose of changing i | ts registered office or r | enistered agent, or ho | oth, in the State of Flo | - - ; | th and accent |
| | tions of registered agent. | or the purpose of a transfering | | ogiotoroa agont, or at | An, in the older of the | onou. Turn turnina tri | ar, and accept |
| | | | | | | | |
| SIGNATURE. | Signature, typed or printed name of registered agen | t and title if applicable (NC | OTE: Registered Agent signature | a recuired when reinstation) | | DATE | |
| | E E | , and and application. (No | TE. Nogration Agent signature | reduied widil lesistating) | | DAIL | |
| | E NOW!!! FEE IS \$150.00 | 9. Election Camp | aign Financing | \$5.00 May Be | | | |
| | ay 1, 2006 Fee will be \$550. | | | Added to Fees | | | |
| | | | | | | | |
| 10. | OFFICERS AND | | 11. | ADDITIONS | /CHANGES TO OFF | ICERS AND DIRECTO | |
| TITLE | P | ☐ Delete | TITLE | | | | e 🗌 Addition |
| NAME OXPOSE ADDRESS | GUZMAN SALDIVAR, NICOLAS | SINA | NAME | | | | |
| STREET ADDRESS CITY-ST-ZIP | 8858 W. FLAGLER ST. #208 | | STREET ADDRESS CITY-ST-ZIP | | | | |
| | MIAMI, FL 33174 | | | | | | |
| TITLE | VP | Delete | TITLE | | | ☐ Chang | e |
| NAME STREET ADDRESS | FERNANDEZ, JUAN JOSE | | NAME | | | | |
| CITY-ST-ZIP | 8858 W. FLAGLER ST. #208 MIAMI, FL 33174 | | STREET ADDRESS CITY-ST-ZIP | | | | |
| | MIMMI, FE 33174 | | | | | | page |
| TITLE | | ☐ Delete | TITLE | | | Chang | e 🗀 Addition |
| NAME STREET ADDRESS | | | NAME STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | | | |
| - | | П. | | | | П 0 | |
| TITLE NAME | | ☐ Delete | TITLE | | | ☐ Chang | e 🔲 Addition |
| STREET ADDRESS | | | NAME STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | | | |
| | | | - | | | П С | n |
| NAME | | ☐ Delete | TITLE NAME | | | ☐ Chang | e |
| | | | | | | | |

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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

3-11-06

305-551-7351

Daytime Phone #

☐ Change

☐ Addition