

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000072000

Entity Name: RUBEN GARCIA MORFFI, INC.

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

161 SE DWIGHT AVE
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

161 SE DWIGHT AVE
PORT ST. LUCIE, FL 34983

New Mailing Address:

FEI Number: 20-2854749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARCIA, RUBEN
161 SE DWIGHT AVE
PORT ST. LUCIE, FL 34983 US

Name and Address of New Registered Agent:

PEREZ, HAYDEE
815 BELVEDERE ROAD
WEST PALM BEACH, FL 33405 US

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.

SIGNATURE: HAYDEE PEREZ

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GARCIA, RUBEN
Address: 161 SE DWIGHT AVE
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: VP (X) Delete
Name: RODRIGUEZ, MIGUEL E
Address: 1335 WELLINGTON STREET
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUBEN GARCIA

P

04/26/2006

Electronic Signature of Signing Officer or Director

Date