## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## May 30, 2006 8:00 am Secretary of State DOCUMENT # P05000080579 05-30-2006 90039 025 \*\*\*150.00 1. Entity Name CELTA INC. 40034310 Principal Place of Business Mailing Address 11345 NW 55 LN 11345 NW 55 LN DORAL CITY, FL 33178 DORAL CITY, FL 33178 2. Principal Place of Business 3. Mailing Address 325 S BISCAYNE 325 S BISCAYNE BUD BLVD Suite, Apt. #, etc. Suite, Apt. #, etc. 05182006 CR2E034 (11/05) Cha-P APT. 1021 APT 1021 City & State City & State 4. FEI Number 20 - 3115999 Applied For MIAMI, FL MIAMI Not Applicable 33<u>131</u> 33131 Country Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GARCIA, WAGNER - GARCIA WAGNER Street Address (P.O. Box Number is Not Acceptable) 11345 NW 55 LN 325 S BISCAYNE BLVD DORAL CITY, FL 33178 APT 1021 MIAMI, FL 33131 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 6, 2006 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE P ☐ Change ☐ Addition ☐ Delete TITLE GARCIA, WAGNER GARCIA, WAGNER NAME NAME STREET ADDRESS 11345 NW 55 LN STREET ADDRESS 325 & BISCAYNE BLUD, APT 1021 CITY-ST-ZIP DORAL CITY, FL 33178 CITY-ST-ZIP MIAMI, FL 33131 TITLE ☐ Change Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP Detete TITLE TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

Wagner Garcia
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

*3*05 358 6*33*9

Date

## CELTA, INC.

325 South Biscoon, Blvd. Saite 102 -Miamt, fl. (313).

5/19/2006

Florida Department of State **Division of Corporations** Uniform Business Report Filings P.O. Box 1500 Tallahassee, Fl. 32302-1500

RE: Celta, Inc. Ooc #P05000080579 FEI # 20-3115999

Dear Sir/Madam:

This is to inform you that we had not received the annual report form year 2006 due to the fact that you have the wrong address in your records, please waive the fees since I never received any notice and this is the first year we have to renew the corporation.

These instructions were given to me by phone today by: Mr. Michelle Milligan please find enclosed the report and check for the year 2006 for the amount of \$150.00

Sincerely,

Wagner Garcia\_ Wagner Garcia