

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000085970

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: CERVANTES & ASSOCIATES INC.

## Current Principal Place of Business:

928 ALBERTVILLE CT  
KISSIMMEE, FL 34759

## New Principal Place of Business:

## Current Mailing Address:

928 ALBERTVILLE CT  
KISSIMMEE, FL 34759

## New Mailing Address:

FEI Number: 01-0839217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VILLAMIL, NANCY  
3501 W. VINE STREET  
KISSIMMEE, FL 34741 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MAYSONET, CLARIBEL  
Address: 928 ALBERTVILLE CT  
City-St-Zip: KISSIMMEE, FL 34759

Title: V ( ) Delete  
Name: PEREZ, JUAN  
Address: 928 ALBERTVILLE CT  
City-St-Zip: KISSIMMEE, FL 34759

Title: S ( ) Delete  
Name: CERVANTES, FELIPE  
Address: 928 ALBERTVILLE CT  
City-St-Zip: KISSIMMEE, FL 34759

Title: T ( ) Delete  
Name: DIAZ, MIGUEL A  
Address: 928 ALBERTVILLE CT  
City-St-Zip: KISSIMMEE, FL 34759

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CERVANTES, JOSE  
Address: 928 ALBERTVILLE CT  
City-St-Zip: KISSIMMEE, FL 34759

Title: V (X) Change ( ) Addition  
Name: MAYSONET, CLARIBEL  
Address: 928 ALBERTVILLE CT  
City-St-Zip: KISSIMMEE, FL 34759

Title: S (X) Change ( ) Addition  
Name: DIAZ, MIGUEL  
Address: 928 ALBERTVILLE CT  
City-St-Zip: KISSIMMEE, FL 34759

Title: T (X) Change ( ) Addition  
Name: PEREZ, JUAN  
Address: 928 ALBERTVILLE CT  
City-St-Zip: KISSIMMEE, FL 34759

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: JOSE CERVANTES

P

04/30/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date