2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 06, 2006 8:00 am Secretary of State

DOCUMENT # P05000097043									0:	2-06-2006 9	0065 04	42 ***150	0.00	
Principal Place of Business 8473 SW 40TH STREET MIAMI, FL 33165				Mailing Address 8473 SW 40TH STREET MIAMI, FL 33165			60012083							
2. Principal Place of Business				3. Mailing Address										
Suite, Apt. #, etc.				Suite, Apt. #, etc.				02022006	i 1	Chg-P	CR2E03	34 (11/05)		
City & State				City & State				4. FEI Num	ber 3/	81058	/	— ——	plied For Applicable	
Žip	p Country			Zip Co		try		5. Certificat	te of Sta	atus Desired		8.75 Add ee Required		
<u> </u>	6. Name	and Address of	Current Regis	tered Agent		Name		7. Name an	id Add	ress of New Re	gistered A	gent		
TATO, MAYDA							Street Address (P.O. Box Number is Not Acceptable)							
2846 SW 1 MIAMI, FL	-		•	Street Address				Der is i	lot Acceptable)					
•												1 =		
							City				FL Zip Code			
SIGNATURE		or plunted name of regis		9. Election Campa	ign Finar	ncing	\$5.	when reinstating)			DATE			
. After Ma	ay 1, 2000	Fee will be		Trust Fund Cont	tribution.		Adde	ed to Fees	<u> </u>					
10.				ND DIRECTORS				E- PRE		NGES TO OFFIC				
TITLE NAME	PD TATÓ, MÁ	YDA		Delete	TITLE		747	O. MA	104			Change	Addition Addition	
STREET ADDRESS CITY-ST-ZIP	2846 SW 132ND CT MIAMI, FL 33175					ET ADDRESS -ST-ZIP	284	16 SW	13	2 n e CT 23/75				
TITLE	VD VD		·	☐ Delete				AMI SIDENT		30//4		Change	Addition	
NAME	DIAZ, NIVALDO					NAME ZDIA		Z 1/11/	211	0 0 m 4 0 T				
STREET ADDRESS CITY-ST-ZIP	2846 SW 132ND CT MIAMI, FL 33175				9	et address -st-zip	KA	46 SW 1 Aryl	12	2 nd CT 23170	_			
TITLE				☐ Delete	TITLE	:		<u> </u>				Change	Addition	
NAME STREET ADDRESS					NAM	ET ADDRESS								
CITY-ST-ZIP						-ST-ZIP								
TITLE		···		☐ Detete	TITLE							Change	Addition	
NAME STREET ADDRESS					NAMI STRE	et address								
CITY-ST-ZIP	i					-ST-ZIP						_		
TITLE			 -	☐ Delete	TITLE							Change	Addition	
NAME STREET ADDRESS					NAM STRE	E Et address	ŀ							
CITY-ST-ZIP						-ST-ZIP								
TITLE				☐ Delete	TITLE			<u></u>				Change	Addition	
NAME STREET ADDRESS					NAM STRE	E et address								
CITY-ST-ZIP						-ST-ZIP								
indicatéd	on this repor	t or supplemental	report is true a	iling does not qualify fo and accurate and that r d to execute this report	my signat	ure shall h	ave the s	same legal effe	ect as if	made under oa	th; that I ar	n an officer	or director	