## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000099691

FILED Aug 22, 2006 Secretary of State

Entity Nai	me: SUREVO	DLUTION, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	DCREST RD. AYNE, FL 33 <sup>-</sup>	149			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	DCREST RD. AYNE, FL 33°	149			
FEI Number:	: 20-3174926	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:	
796 WOOI KEY BISCA	RRIA, MARCE DCREST RD. AYNE, FL 33 <sup>-</sup> named entity e of Florida.	149 US	e purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			gent	Date	
		93(2)(b), F.S., the corporation diding Trust Fund Contribution ( ).	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPT ( ECHAVARRIA, 796 WOODCR KEY BISCAYN	EST RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VS ( ROTHSTEIN, I 796 WOODCF KEY BISCAYN	EST RD.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: MARCELA ECHAVARRIA DPT 08/22/2006