

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000103189

FILED
Apr 19, 2006
Secretary of State

Entity Name: LATIN QUARTER DEVELOPERS, INC.

Current Principal Place of Business:

P. O. BOX 415050
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 415050
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 75-3197100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTES, ANTONIO
1435 NW 1 STREET
3
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

MONTES, ANTONIO
1534 NW 1 STREET
MIAMI, FL 33135 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: _____

Electronic Signature of Registered Agent

04/19/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NICOLAS, CARDENAS
Address: P. O. BOX 415050
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP () Delete
Name: ANTONIO, MONTES
Address: P. O. BOX 415050
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP () Delete
Name: DANTON, HENRIQUEZ
Address: P. O. BOX 415050
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP () Delete
Name: ALEXANDER, MONTES
Address: P. O. BOX 415050
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANTONIO MONTES

Electronic Signature of Signing Officer or Director

VP

04/19/2006

Date