## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P05000110874

Entity Name: LA ESQUINA DE CARLUCHO INC.

FILED Mar 03, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1831 SW 83 AVE 1831 SW 83 AVE MIAMI, FL 33165 MIAMI, FL 33155 US

Current Mailing Address: New Mailing Address:

1831 SW 83 AVE 1831 SW 83 AVE

MIAMI, FL 33165 MIAMI, FL 33155 US

FEI Number: 20-3271471 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PEREZ, JOSE C

1831 SW 83 AVE

MIAMI, FL 33165 US

JIMENEZ, LYSMARIS

1831 SW 83 AVE

MIAMI, FL 33155 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: LYSMARIS JIMENEZ 03/03/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: PSTD (X) Change ( ) Addition

 Name:
 PEREZ, JOSE C
 Name:
 JIMENEZ, LYSMARIS

 Address:
 1831SW 83 AVE
 Address:
 1831SW 83 AVE

 City-St-Zip:
 MIAMIA, FL 33165
 City-St-Zip:
 MIAMI, FL 33155 US

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BOZA, RAUL
 Name:

 Address:
 14261 SW 30TH ST
 Address:

 City-St-Zip:
 MIAMI, FL 33175
 City-St-Zip:

Title: S (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BETANCOURT, GASPAR
 Name:

 Address:
 1831 SW 83 AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33165
 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: LYSMARIS JIMENEZ PSTD 03/03/2006