2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000123426

Entity Name: CASA GINA, INC.

FILED Apr 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4175 SW LEIGHTON FARMS AVENUE PALM CITY, FL 34990 **Current Mailing Address: New Mailing Address:** 4175 SW LEIGHTON FARMS AVENUE PALM CITY, FL 34990 US FEI Number: 59-3816860 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CREECH, EUGENIA V 4175 SW LEIGHTON FARMS AVENUE PALM CITY, FL 34990 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CREECH, EUGENIA V Name: Name: 4175 SW LEIGHTON FARMS AVENUE Address: Address: City-St-Zip: PALM CITY, FL 34990 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: CREECH, WILLIAM L JR. Name: 4175 SW LEIGHTON FARMS AVENUE Address: Address: PALM CITY, FL 34990 US City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition CREECH, EUGENIA V Name: Name: 4175 SW LEIGHTON FARMS AVENUE Address: Address: PALM CITY, FL 34990 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition RODRIGUEZ, RAMADIER JR. Name: Name: Address: 4175 SW LEIGHTON FARMS AVENUE Address: City-St-Zip: PALM CITY, FL 34990 US City-St-Zip: Title: Title: () Delete () Change () Addition FAUST, MILAGRO Name: Name: 17209 GUNN HIGHWAY Address: Address: City-St-Zip: ODESSA, FL 33556 US City-St-Zip: Title: () Delete Title: () Change () Addition RODRIGUEZ, LEYNADIER Name: Name: Address: PO BOX 754 Address: City-St-Zip: City-St-Zip: PALM CITY, FL 34991 US

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: EUGENIA V. CREECH PRES 04/10/2006