2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2006 8:00 am
Secretary of State
07-28-2006 90031 034 ***150.00

DOCUMENT # P05000139545
1. Entity Name
XILAMPA CORPORATION

40101117

Principal Place of Business	Mailing Address
3105 N.W. 27TH AVENUE MIAMI, FL 33142 US	1197 N.W. 120TH STREET MIAMI, FL 33168 US

07252006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
	1640 NW 127 ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State MIAMI FL
Zip / Country	Zip 33167 / Country DADE

4. FEI Number 20-3606702 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, SANDRA
1197 N. W. 120TGH STREET
MIAMI, FL 33168

7. Name and Address of New Registered Agent

Name RODRIGUEZ SANDRA
Street Address (P.O. Box Number is Not Acceptable)
1640 NW 127 STREET
City MIAMI FL Zip Code 33167

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] 7-25-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	RODRIGUEZ, SANDRA		NAME		
STREET ADDRESS	1197 N.W. 120TH STREET		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33168		CITY-ST-ZIP		
TITLE	VP	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	CASTILLO, JOSE M		NAME		
STREET ADDRESS	1197 N.W. 120TH STREET		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33168		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 7-25-06 (305)637-3932
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40101117

JULY 25, 2006.

FLORIDA DEPARTMENT OF STATE
Division of Corporation
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Corporate Annual Fee # P05000139545

Dear Secretary of State:

The Purpose of this letter is to request an exemption of penalty for late payment year 2006 according with Uniform Business Report of **XILAMPA CORPORATION.,**
a Florida Corporation.

I have not paid Annual Fee Corporation on time because I, don't received the corporate annual report, however I, want to hold the name for my small business, I have attached annual fee payment check for amount of $ 150.00.

Should you have any question regarding this matter, please call me at telephone number (305)637-3932.

Sincerely,

XILAMPA CORPORATION

Sandra Rodriguez

SANDRA RODRIGUEZ
President