2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 15, 2006
Secretary of State

DOCUMENT# P05000150481

Entity Name: SALOME ENTERPRISES INC.

Current Principal Place of Business:

5665 SW 137 AVENUE
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

5665 SW 137 AVE
MIAMI, FL 33183

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CUARTAS, CARLOS A
13241 SW 67 STREET
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

CUARTAS, CARLOS A
5665 SW 137 AVE
MIAMI, FL 33183 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: 06/15/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VIVEROS, CATALINA
Address: 5665 SW 137 AVENUE
City-St-Zip: MIAMI, FL 33183

Title: VP (X) Delete
Name: CUARTAS, CARLOS A
Address: 13241 SW 67 STREET
City-St-Zip: MIAMI, FL 33183

Title: DIR (X) Delete
Name: CIRCULO DE LA BELLEZ, A
Address: CALLE 12 #12-48
City-St-Zip: PEREIRA COLOMBIA, CO 00000 CO

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: CUARTAS, CARLOS
Address: 5665 SW 137 AVENUE
City-St-Zip: MIAMI, FL 33183

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: CARLOS A CUARTAS PRES 06/15/2006
Electronic Signature of Signing Officer or Director Date