2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 28, 2006 8:00 am Secretary of State

DOCUMENT # P05000157943 1. Entity Name RAIS VIDA INTERNATIONAL INC						03-13-2006	5 90052 0.	31 ***.	150.00	
Principal Place of Business 11091 SW 65 ST MIAMI, FL 33173 US		Mailing Address 11091 SW 65 ST MIAMI, FL 33173	11091 SW 65 ST			gerande.				
2. Principal F	Place of Business	3. Mailing Address	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #. etc.	Suite, Apt. #. etc.		03102006	Chg-P	CR2E034	4 (11/05)		
City & Stat	le	City & State	City & State		4. FEI Numb			A	oplied For	
Zip	Country	Zip	Country		20-3875		\$i	8.75 Add	ot Applicable littonal	
	6. Name and Address of Cu	urrent Registered Agent	1			Address of New R	F6	ent ent	<u>d</u>	
IORDAN	JORDAN, ALDO				Name					
11091 SW MIAMI, FL	/65 ST		Stre	Street Address (er is Not Acceptable	0)			
14112-1411, C.C.	. 33173									
			City				FL	Zip Cod		
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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent atgreture required when retreatedly) DATE										
After M	E NOWIII FEE 13 \$150.0 ay 1, 2006 Fee will be \$!			□ \$5.	.00 May Be ed to Fees					
10. MLE	PD	AND DIRECTORS	11.		ADDITIONS	CHANGES TO OFF				
MAME STREET ADDRESS CITY-ST-ZIP	JORDAN, ALDO 11091 SW 65 ST MIAMI, FL 33173	L) Celebrate	NAME STREET ADDR	ESS			·	_] Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDR	ESS			C] Change	Addition	
TITLE NAME STREET ADDRESS CIFY-ST-ZIP		☐ Deletz	TITLE NAME STREET ADDR					Change	☐ Addition	
12. Thereby certify that the information supplied with this filling 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 cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 907, 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: WICE - ANSS 10 BNF 3/5/64 (3 or) 47 5-106 8										
SIGNAT	URE:	D PR MOUTED HARE OF BIGHING OFFICER	De DIRECTOR	CF_AU	55 IDON'T	3/5/01	· (304)	178-	1060	



ATTACHMENT

66007420

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 15, 2006

RAIS VIDA INTERNATIONAL INC 11091 SW 65 ST MIAMI, FL 33173 US OK

Subject: RAIS VIDA INTERNATIONAL INC

Reference Number:

P05000157943

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH ANNUAL REPORTS SECTION