

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P05000158320

1. Entity Name
3666 CORPORATION



Principal Place of Business
12765 FOREST HILL BOULEVARD
SUITE 1302
WELLINGTON, FL 33414

Mailing Address
12765 FOREST HILL BOULEVARD
SUITE 1302
WELLINGTON, FL 33414



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02102006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FC3 Number

59-3807321

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DE MENDOZA, MARIO G
12765 FOREST HILL BOULEVARD
SUITE 1302
WELLINGTON, FL 33414

7. Name and Address of New Registered Agent

Name
Mario G. de Mendoza, III, P.A.
Street Address (P.O. Box Number is Not Acceptable)
12765 Forest Hill Blvd, Ste 1302
City Wellington FL 33414

8. The above named entity certifies 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 obligation of the registered agent.

SIGNATURE: *Mario G. de Mendoza, III, P.A.*

BY: *Mario G. de Mendoza, III, Pres.*

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
LUCAS, ALBERTO
STREET ADDRESS
12765 FOREST HILL BOULEVARD, SUITE 1302
CITY-STATE-ZIP
WELLINGTON, FL 33414

TITLE
NAME
DE LUCAS, PATRICIA PAYOT
STREET ADDRESS
12765 FOREST HILL BOULEVARD, SUITE 1302
CITY-STATE-ZIP
WELLINGTON, FL 33414

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
LUCAS, ALBERTO
STREET ADDRESS
12765 Forest Hill Blvd, Ste 1302
CITY-STATE-ZIP
Wellington, FL 33414

TITLE
NAME
LUCAS, PATRICIA PAYOT DE
STREET ADDRESS
12765 Forest Hill Blvd, Ste 1302
CITY-STATE-ZIP
Wellington, FL 33414

TITLE
NAME
TORRES, PEDRO O.
STREET ADDRESS
12765 Forest Hill Blvd, Ste 1302
CITY-STATE-ZIP
Wellington, FL 33414

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information furnished on this filing complies with the requirements 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. I am an officer or director of the corporation in the receipt of this report and I am filing 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 original signature, all of which are true and correct.

SIGNATURE: *Alberto Lucas* ALBERTO LUCAS, Pres.

✓ 4-20-06

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