## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 27, 2006 8:00 am Secretary of State

					5 Secretary of State				
DOCUMENT # P05000159696  1. Entity Name ORELLANA WIRE LATHE CORP						02-27-2006	_		
Principal Plac	e of Business	Mailing Address	•						
110 LOGARTO CIR W APT B112					,	•			
						I T   <b>1</b>   <b>1</b>   1   1   1   1   1   1   1   1   1	ANTA 1911 DA 1811 DA 1818 P		
2. Principal Place of Business Osellana Wice whe Cose Suite, Apt. #, etc.									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			02102006	Chg-P	CR2E034	4 (11/05)	
City & State	Logarto Cir Apt HIL	City & State			4. FEI Numbe	•		TIAn	plied For
Towns Fl.						3904 =	135	_ <del> </del>	t Applicable
Zip 3.34	Country  Hills bosouch	Zip	Country	7.8.1 .1		of Status Desired	□ \$	8.75 Add ee Required	itional d
	6. Name and Address of Current Reg	jistered Agent	•		7. Name and	Address of New	Registered Ag	jent	
00511.444			Name	е					
ORELLANA, ARMANDO 110 LOGARTO CIR W APT B112 TAMPA, FL 33612			Stree	Street Address (P.O. Box Number is Not Acceptable)					
			City	FL Zip Code ·					
	named entity submits this statement for the ions of registered agent.	purpose of changing its	registered office	e or register	ed agent, or both	n, in the State of F	lorida. I am far	miliar with,	and accept
SIGNATURE									
"a	Signature, typed or printed name of registered agent and (	tle if applicable. (NOTE	: Registered Agent siç	nature required	when reinstating)		DATE		
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campai Trust Fund Contr			00 May Be ed to Fees				
10.	OFFICERS AND DIR	ECTORS	11.		ADDITIONS/0	CHANGES TO OF	FICERS AND D	)IRECTORS	S IN 11
TITLE	D	☐ Delete	TITLE				[	Change	☐ Addition
NAME	ORELLANA, ARMANDO		NAME						
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12. I hereby of indicated	pertify that the information supplied with this on this report or supplemental report is tru	s filing does not qualify for e and accurate and that m	r the exemptions	s contained Il have the s	in Chapter 119, same legal effect	Florida Statutes. as if made under	I further certify oath; that I am	that the in	formation or director

1. Thereby 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: ARMONDO DE JORDA DE DESIGNATURE DE DESIGNATURE DE DESIGNATURE DE DESIGNATURE Phone •