

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000161521

Entity Name: CASITAS BONITAS, INC.

FILED
Mar 29, 2006
Secretary of State

Current Principal Place of Business:

POST OFFICE BOX 4436
TAMPA, FL 336774436

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 4436
TAMPA, FL 336774436

New Mailing Address:

900 W. INDIANA AVENUE
TAMPA, FL 336774436

FEI Number: 20-3931535

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ-ROEL, LUCIA S
900 W. INDIANA AVENUE
TAMPA, FL 336774436 US

Name and Address of New Registered Agent:

HERNANDEZ, BETTY
900 W. INDIANA AVENUE
TAMPA, FL 336774436 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: BETTY HERNANDEZ

03/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HERNANDEZ, ALEX
Address: POST OFFICE BOX 4436
City-St-Zip: TAMPA, FL 336774436

Title: D () Delete
Name: GONZALEZ-ROEL, JULIO
Address: POST OFFICE BOX 4436
City-St-Zip: TAMPA, FL 336774436

Title: D () Delete
Name: GONZALEZ-ROEL, LUCIA S
Address: POST OFFICE BOX 4436
City-St-Zip: TAMPA, FL 336774436

Title: D () Delete
Name: HERNANDEZ, BETTY
Address: POST OFFICE BOX 4436
City-St-Zip: TAMPA, FL 336774436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LUCIA GONZALEZ-ROEL

D

03/29/2006

Electronic Signature of Signing Officer or Director

Date