

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

01-23-2006 90050 038 \*\*\*150.00

**DOCUMENT # P05000167277**

1. Entity Name  
**18 PLAZA CORP.**



Principal Place of Business  
**1500 MIAMI CENTER  
201 SOUTH BISCAYNE BLVD  
MIAMI, FL 33131**

Mailing Address  
**1500 MIAMI CENTER  
201 SOUTH BISCAYNE BLVD  
MIAMI, FL 33131**

2. Principal Place of Business  
**275 N.E 18 Street**  
Suite, Apt. #, etc.  
**CU# 101**

3. Mailing Address  
**275 N.E 18 Street**  
Suite, Apt. #, etc.  
**CU# 101**

City & State  
**MIAMI FLORIDA**  
Zip  
**33132** Country  
**U.S.A**

City & State  
**MIAMI FLORIDA**  
Zip  
**33132** Country  
**USA**

01092006 Chg-P CR2E034 (11/05)

4. FEI Number  
**20-4007169** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**FERREIRA DE MELO, CARLOS  
275 NE 18 STREET CU #101  
MIAMI, FL 33132**

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 signature required when reinstating)

DATE

**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 STREET ADDRESS CITY-ST-ZIP	D FERREIRA DE MELO, CARLOS 4779 COLLINS AVE APT 3005 MIAMI BEACH, FL 33140	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERREIRA DE MELO, JOSE LUIS 4779 COLLINS AVE APT 3005 MIAMI BEACH, FL 33140	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERREIRA DE MELO, MARTIN 4779 COLLINS AVE APT 3005 MIAMI BEACH, FL 33140	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Martin F. Melo* **MARTIN F. MELO /D**

**03/27/06**

Date

Daytime Phone #

**305-571-8804**

ATTACHMENT

66008101  
# P05000167277

18 PLAZA CORP.

275 NE 18ST Ste 101  
Miami, FL 33132  
[305] 577-8804 / [305] 377-3713

Miami, March 27, 2006

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P.O Box 1500  
Tallahassee, Florida 32302-1500

Reference Number: P00000098646      2006 Annual Report

Please update our information in your files, attached are the annual report included the FEI Number, and copy of the check that was already send.

If you have any question please contact me @ 305-577-8804

Thank you,

  
Martin Ferreira de Melo  
Director