

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2008 8:00 am
Secretary of State

02-13-2008 90026 012 ***150.00

DOCUMENT # P06000068061

1. Entity Name
AC HOLDINGS 2006, INC.



Principal Place of Business
407 LINCOLN RD., STE. 502
MIAMI BEACH, FL 33139

Mailing Address
407 LINCOLN RD., STE. 502
MIAMI BEACH, FL 33139

40024065



2. Principal Place of Business - No P.O. Box #
407 LINCOLN RD

3. Mailing Address
407 LINCOLN RD

Suite, Apt. #, etc.
PH-N

Suite, Apt. #, etc.
PH-N

City & State
MIAMI BEACH FL

City & State
MIAMI BEACH FL

Zip
33139

Country

Zip
33139

Country

01032008 Chg-P CR2E034 (12/06)

4. FEI Number
20-4917481

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

MURAI, WALO AND BIONDO
2 ALAHAMBRA PLAZA
PENTHOUSE 1B
CORAL GABLES, FL 33134

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, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME AGUADO, ISIDRO
STREET ADDRESS 407 LINCOLN RD., STE. 502
CITY-STATE-ZIP MIAMI BEACH, FL 33139 ☐ Delete

TITLE VSD
NAME TORRES, ANGEL E
STREET ADDRESS 407 LINCOLN RD., STE. 502
CITY-STATE-ZIP MIAMI BEACH, FL 33139 ☐ Delete

TITLE D
NAME AGUADO, MIGUEL
STREET ADDRESS 407 LINCOLN RD., STE. 502
CITY-STATE-ZIP MIAMI BEACH, FL 33139 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME
STREET ADDRESS 407 LINCOLN RD PH-N ☒ Change ☐ Addition
CITY-STATE-ZIP

TITLE NAME
STREET ADDRESS 407 LINCOLN RD PH-N ☒ Change ☐ Addition
CITY-STATE-ZIP

TITLE NAME
STREET ADDRESS 407 LINCOLN RD PH-N ☒ Change ☐ Addition
CITY-STATE-ZIP

TITLE NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ 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: Angel E. Torres ANGE E. TORRES

2/11/08 (305) 672-0805

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Phone Number