## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000088405

Address:

City-St-Zip:

906 ELDRIDGE STREET

ORLANDO, FL 32803 US

Entity Name: CINCO ESTRELLAS CORPORATION

FILED Apr 19, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3670 JONQUIL LANE 517 EAST MICHIGAN STREET WINTER PARK, FL 32792 ORLANDO, FL 32806 US **Current Mailing Address: New Mailing Address:** 3670 JONQUIL LANE WINTER PARK, FL 32792 US FEI Number: 20-5116086 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RODRIGUEZ, REYNALDO 3670 JONQUÍL LANE WINTER PARK, FL 32792 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition RODRIGUEZ, REYNALDO Name: Name: 3670 JONQUIL LANE Address: Address: City-St-Zip: WINTER PARK, FL 32792 US City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: SIRICA, ANTHONY C Name: 906 ELDRIDGE STREET Address: Address: ORLANDO, FL 32803 US City-St-Zip: City-St-Zip: T () Delete RODRIGUEZ, JULIA K Title: Title: () Change () Addition Name: Name: 3670 JONQUIL LANE Address: Address: City-St-Zip: WINTER PARK, FL 32792 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition SIRICA, MARIA E Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: REYNALDO RODRIGUEZ P 04/19/2007