


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P16247 1. Entity Name SPANISH HOUSE, INC.	
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Principal Place of Business 1360 N.W. 88TH AVENUE MIAMI, FL 33172-3020	Mailing Address 1360 N.W. 88TH AVENUE MIAMI, FL 33172-3020
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DO NOT WRITE IN THIS SPACE



07062006 No Chg-P CR2E034 (11/05)

4. FEI Number 36-3513391	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ECKLEBARGER, DAVID 1360 N.W. 88TH AVENUE MIAMI, FL 33172	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ECKLEBARGER, DAVID 1360 NW 88 AVE. MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ECKLEBARGER, CATHERINE 1360 NW 88 AVE. MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARLTON, DAVID 1360 NW 88 AVE MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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07/27/06-80006-018 550.00

**DO NOT WRITE
IN THIS SPACE**

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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date 7/9/06 <small>Date</small>	Daytime Phone # 305-592-6136 <small>Daytime Phone #</small>
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