

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000016011

FILED
Jan 09, 2006
Secretary of State

Entity Name: OLD TAVERNIER CORPORATION

Current Principal Place of Business:

90133 OLD HWY.
TAVERNIER, FL 33070

New Principal Place of Business:

90311 OLD HWY.
TAVERNIER, FL 33070

Current Mailing Address:

P.O. BOX 642
TAVERNIER, FL 33070

New Mailing Address:

FEI Number: 65-0391081 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOFINAS, ILIAS
92550 OVERSEAS HWY #217
TAVERNIER, FL 33070 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: KOULKOUDINAS, EVANGELOS
Address: 142 PUEBLO STREET
City-St-Zip: TAVERNIER, FL 33070

Title: VPSD (X) Delete
Name: KOFINAS, ILIAS
Address: 92550 OVERSEAS HWY #217
City-St-Zip: TAVERNIER, FL 33070

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KOFINAS, ILIAS
Address: 92550 OVERSEAS HWY #217
City-St-Zip: TAVERNIER, FL 33070

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: ILIAS KOFINAS

PD

01/09/2006

Electronic Signature of Signing Officer or Director

Date