## 2006 FOR PROFIT CORPORATION

## FILED ANNUAL REPORT Jan 27, 2006 08:00 AM Secretary of State **DOCUMENT # P93000017864** IBERO INVESTMENTS, INC. Principal Place of Business Mailing Address 4700-36 S.W. 75TH AVE. 7384 NW 56TH ST MIAMI, FL 33155 MIAMI, FL 33166 01062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0466935 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FERNANDEZ, MANUEL DO NOT WRITE 10365 NW 46TH STREET MIAMI, FL 33178 IN THIS SPACE 3. 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE FERNANDEZ, MANUEL NAME 10365 NW 46TH STREET STREET ADDRESS MIAMI, FL 33178 City-St-Zip 1/100100406484 02/07/06-80091-004 150.00 ME NAME STREET ADDRESS CTTY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME

12. I hereby certify that the information supplied with this filling 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 cath; 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.

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STREET ADDRESS CRY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MANUEL FERNANDEZ

1-24-2006

305-883-66