2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

CHY-ST-2P

SIGNATURE:

Feb 15, 2006 08:00 AM Secretary of State DOCUMENT # P93000054877 CENTURY INVESTORS, INC. Principal Place of Business Mailing Address 37 SOUTH ROYAL POINCIANA BLVD. 37 SOUTH ROYAL POINCIANA BLVD. MIAMI SPRINGS, FL 33166 MIAMI SPRINGS, FL 33166 01202006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0485418 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PEREZ, ALBERTO DO NOT WRITE 37 S. ROYAL POINCIANA BLVD MIAMI SPRINGS, FL IN THIS SPACE MIAMI SPRINGS, FL 33166 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 2. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PEREZ, ALBERTO NAME STREET ADDRESS 37 S. ROYAL POINCIANA BLVD CITY-ST-ZIP MIAMI SPRINGS, FL 33166 U0000435503 STD TITLE 02/25/06-80843-025 150.00 PEREZ, OLGA IRENE MANAT STREET ADDRESS 37 S. ROYAL POINCIANA BLVD MIAMI SPRINGS, FL 33166 CITY-ST-ZIP DILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP me IN THIS SPACE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TIME HAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not quality 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 any that hay 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 ampoyaged.

NO OFFICER OF

FILED