2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 23, 2006 8:00 am Secretary of State

1. Entity Nam	MENT # P94000021				01-23-200	6 90105 045 **	*150.00		
Principal Place 8071 W. 21S HIALEAHG, FI	T COURT	Mailing Address 8071 W. 21ST COURT HIALEAHG, FL 33016				20	002356		
2. Principal P	lace of Business. Court	3. Mailing Address 8064 W Suite, Apt. #, etc.	21 C	ourt	01142006	Chg-P	CR2E034 (1		
HCity & State	an FL	City & State	FL		4. FEI Numb	er	3.22337(1	Applied For	
3301	Country USA	33016	Country	1	5. Certificate	of Status Desire	Fee R	5 Additional equired	
JORGE, R 8071 W. 2 HIALEAH,	1ST COURT	Registered Agent	Nam Stre	<u>Ku</u>	belie	O H cer is Not Accepted	<u> </u>	Bear II	
8. The above the obligati	named entity submits this statement for ions of existered agent.	Juge.	registered office			th, in the State of	Florida. I am familia	with, and acce	•pt
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees									
10. TITLE	OFFICERS AND	DIRECTORS Delete	11.	P.			DEFICERS AND DIRE		tion
NAME STREET ADDRESS CITY-ST-ZIP	JORGE, RUBELIO H 8071 W. 2187 COURT HIALEAH, FL 33016		NAME Street Ador City-St-Zip	1	4 W 21	Sount =L 3301	_		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JORGE, RAFAEL V 430 NW 214 ST APT #102 MIAMI, FL 33169	□ Delete	TITLE NAME STREET ADOR				□ c	hange 🔲 Addil	lion
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Q PALACIO, IGNACIO A 10453 SW 21 TERRACE MIAMI, FL 33165	☐ Delete	TITLE NAME STREET ADDR	ESS	,	, , , , , , , , , , , , , , , , , , ,	ci	hange 🔲 Addit	tion
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRI CITY-ST-ZIP	ESS		,,,	c	hange 🗌 Addit	lion
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADORT CITY-ST-ZIP	ESS			□ c	hange 🔲 Addit	tion
NAME STREET ADDRESS CITY-ST-ZIP	sertify that the information supplied with	☐ Delete	TITLE NAME STREET ADDRI CITY-ST-ZIP				c		

12. Thereby certify that the information supplied with this filling 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 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: SIGNATURE: SIGNATURE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/06 (186) 258-3862