

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000045006

FILED
Jan 15, 2006
Secretary of State

Entity Name: NEPALBA INVESTMENTS, INC.

Current Principal Place of Business:

2566 JARON WAY
WESTON, FL 33327 US

New Principal Place of Business:

Current Mailing Address:

2566 JARDIN WAY
WESTON, FL 33327 US

New Mailing Address:

FEI Number: 65-0506444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REBOREDO, GASTON
2566 JARON WAY
WESTON, FL 33327 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: ACOSTA, ALBA D
Address: 2566 JARON WAY
City-St-Zip: WESTON, FL 33327

Title: VPDS () Delete
Name: ACOSTA, NELSON
Address: 2566 JARDIN WAY
City-St-Zip: WESTON, FL 33327

Title: AVP () Delete
Name: REBOREDO, GASTON
Address: 2566 JARON WAY
City-St-Zip: WESTON, FL 33327

Title: AVP () Delete
Name: REBOREDO, REBECA
Address: 2566 JARON WAY
City-St-Zip: WESTON, FL 33329

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ACOSTA ALBA

PD

01/15/2006

Electronic Signature of Signing Officer or Director

Date