

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

6/8

FILED
Jul 05, 2006 8:00 am
Secretary of State

06-08-2006 90003 044 ***158.75

DOCUMENT # P94000074477	
1. Entity Name CONSOLIDATED CUBAN OIL AND GAS RIGHTS CORPORATION	

Principal Place of Business 421 MAYA AVE. CORAL GABLES, FL 33146 US	Mailing Address P.O. BOX 143557 CORAL GABLES, FL 33114 US
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DO NOT WRITE IN THIS SPACE



05102006 No Chg-P CR2E034 (11/05)

4. FE Number NOT APPLICABLE	Applied For ☐ Applied For ☐ Not Applicable
3. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent DIAZ-MASVIDAL GERTRUDIS 421 MAYA AVE. CORAL GABLES, FL 33146
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IN THIS SPACE**

6. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title is required. (NOTE: Registered agent signature required when renewing)

FILE NUMBER FEE IS \$150.00 Due by September 6, 2006	7. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	In accordance with s. 607.153(2)(b), F.S., the corporation did not receive the prior notice.
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8. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP DIAZ-MASVIDAL GERTRUDIS 421 MAYA AVE. CORAL GABLES, FL 33146
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV VIGGER, MARIA M 421 MAYA AVE. CORAL GABLES, FL 33146
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

9. I hereby certify that the information supplied with this filing 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 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 filers empowered.

SIGNATURE: Gertrudis Diaz Masvidal 6-21-06
SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR