2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 08:00 Al Secretary of State

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1. Entity Name PEGÚS, INC.



Principal Place of Business

% HAYDEE CEBALLOS, CPA 354 SEVILLA AVE. CORAL GABLES, FL 33134

Mailing Address

% HAYDEE CEBALLOS, CPA 354 SEVILLA AVE. CORAL GABLES, FL 33134



DO NOT WRITE IN THIS SPACE

04192006 No Chg-P CR2E034 (11/05)

4. FE! Number 65-0595405

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KOSS, A. ATTY. 782 NW 42 AVENUE #340

DO NOT WRITE

MIAMI, FL	33126			IN THIS SPACE			
8. The above the obligat	named entity submits this statement for the putions of registered agent.	urpose of changing its registe	ered office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable (NOTE Registe	red Agent signature	gent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees	U00000556497 05/17/06-80012-003 150.00		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	OFFICERS AND DIRECT DPS CEBALLOS, HAYDEE 354 SEVILLA AVE. CORAL GABLES, FL 33134	IOHS		DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				IN THIS SPACE			
NAME STREET ADDRESS							

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 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:

CITY-ST-ZIP