


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2006 08:00 A
Secretary of State

DOCUMENT # P94000087720 1. Entity Name VILLA CARMEN, INC.	
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Principal Place of Business 11011 S.W. 69 DRIVE MIAMI, FL 33173	Mailing Address 11011 S.W. 69 DRIVE MIAMI, FL 33173
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DO NOT WRITE IN THIS SPACE



03142006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0539524	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DOMINGUEZ, CARMEN 11011 S.W. 69 DRIVE MIAMI, FL 33173
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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000476889 04/06/06-80028-018 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIXTO, EMILIO 4000 S W 128TH AVE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SIXTO, FELIPE 12890 S.W. 26TH ST. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIXTO, ANDRES 9630 SW 44TH ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARMEN, DOMINQUEZ 11011 SW 69TH DR MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIXTO, TACY DE LA CAN 903 OLD FIELD DR BRANDON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SIXTO, CARMEN 2290 SW 6TH ST MIAMI, FL

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IN THIS SPACE**

12. 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 like empowered.

SIGNATURE: *Carmen* 3/31/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #