


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000018682	
1. Entity Name BETHANY ENTERPRISES CORP.	

Principal Place of Business 12711 NW 6 ST. MIAMI, FL 33182 US	Mailing Address P.O. BOX 591034 MIAMI, FL 33159-1034 US
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DO NOT WRITE IN THIS SPACE	
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01232006 No Chg-P CR2E034 (1/1/05)

4. FEI Number 65-0563248	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent MERMELSTEIN, MICHAEL 3211 PONCE DE LEON BLVD STE 305 CORAL GABLES, FL 33134

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5. 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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BABUN, JOSE J 12711 NW 6 ST. MIAMI, FL 33182
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HIERRO, CARLOS M 11780 SW 18 STREET, APT. 409 MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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02/24/06-80036-025 150.00

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Subil Pres.* **2-8-06** **786-797-0496**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #