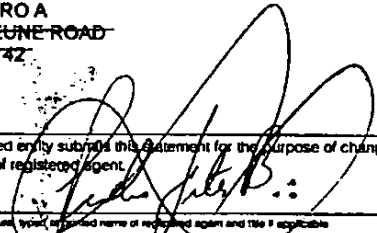
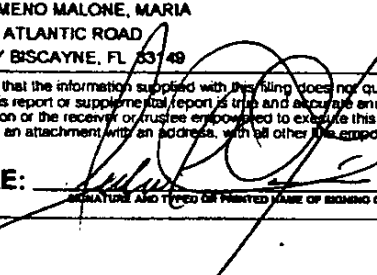


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2006 8:00 am
Secretary of State

05-01-2006 90360 026 ***158.75

DOCUMENT # P95000044580			
1. Entity Name EXPRESO INTERNACIONAL ORMENO, INC.			
Principal Place of Business 2601 NW LEJEUNE RD MIAMI, FL 33142 US		Mailing Address 2601 NW LEJEUNE RD MIAMI, FL 33142 US	
2. Principal Place of Business 2751 NW 27TH AVE.		3. Mailing Address 16901 SW 92ND COURT	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MIAMI, FL		City & State PALMETTO BAY, FL	
Zip 33142	Country USA	Zip 33157	Country USA
4. Name and Address of Current Registered Agent FORTES, PEDRO A 2601 NW LEJEUNE ROAD MIAMI, FL 33142		5. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 16901 SW 92ND COURT City PALMETTO BAY FL Zip Code 33157	
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 04/27/06	
FILE NOW!! FEE IS \$150.00 After May 1, 2006, Fee will be \$550.00		8. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ORMENO CABRERA, JOAQUIN U 320 ATLANTIC ROAD KEY BISCAYNE, FL 33149 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ORMENO MALONE, LUIS J 320 ATLANTIC ROAD KEY BISCAYNE, FL 33149 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORMENO MALONE, JULIO C 320 ATLANTIC ROAD KEY BISCAYNE, FL 33149 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORMENO MALONE, MERCEDES I 320 ATLANTIC ROAD KEY BISCAYNE, FL 33149 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORMENO MALONE, CECILIA M 320 ATLANTIC ROAD KEY BISCAYNE, FL 33149 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORMENO MALONE, MARIA 320 ATLANTIC ROAD KEY BISCAYNE, FL 33149 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 full empowerment.			
SIGNATURE: 		DATE 06/15/06	