


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P96000016612</b> 1. Entity Name <b>VENUS INTERNATIONAL ENTERPRISES, INC.</b>		
Principal Place of Business 2751 S OCEAN DR STE 1706 HOLLYWOOD, FL 33019	Mailing Address 2751 S OCEAN DR STE 1706 HOLLYWOOD, FL 33019	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent  UCROS, MARTHA C 2751 S OCEAN DR #1706 HOLLYWOOD, FL 33019		DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
<b>10. OFFICERS AND DIRECTORS</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD UCROS, MARTHA C 2751 S OCEAN DR APT 1706 HOLLYWOOD, FL 33019	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD TEJADA, JOSE 2751 S OCEAN DR APT 1706 HOLLYWOOD, FL 33019	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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.		
<b>SIGNATURE:</b> <i>Martina C. Ucros</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <i>4/7/06</i> (954) 922-6905 <small>Daytime Phone #</small>



04062006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0642724	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

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05/04/06-80006-010 150.00