## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000029795

Entity Name: OTTO DE SOUZA AGUIAR, INC.

POMPANO BEACH, F

City-St-Zip:

FILED Apr 18, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 901 CYPRESS GROVE DR #201 POMPANO BCH, FL 33069 **Current Mailing Address: New Mailing Address:** 901 CYPRESS GROVE DR #201 POMPANO BEACH, FL 33069 US FEI Number: 65-0669609 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AGUIAR, ELLEN 901 CYPRESS GROVE STE. 201 POMPANO BEACH, FL 33069 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition AGUIAR, OTTO Name: Name: 901 CYPRESS GROVE DR. Address: Address: City-St-Zip: POMPANO BEACH, FL City-St-Zip: ( ) Delete Title: Title: () Change () Addition Name: AGUIAR, ELLEN Name: 901 CYPRESS GROVE DR. Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELLEN AGUIAR O 04/18/2006