

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 A**  
**Secretary of State**

**DOCUMENT # P96000077119**  
 1. Entity Name  
 LA CASA DI NORMA, INC.



Principal Place of Business  
 1609 S.E. HIGHWAY 19  
 CRYSTAL RIVER, FL 34429

Mailing Address  
 1609 S.E. HIGHWAY 19  
 CRYSTAL RIVER, FL 34429



04272006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3401708	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 ORTIZ, NORMA  
 1609 S.E. HIGHWAY 19  
 CRYSTAL RIVER, FL 34429

**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 *Norma Ortiz* DATE 4-28-06

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT ORTIZ, NORMA 1609 S.E. HIGHWAY 19 CRYSTAL RIVER, FL 34429
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U00000553424  
 05/15/06-80050-020 150.00

**DO NOT WRITE 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: *Norma Ortiz* DATE 4-28-06 352-795469