

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000036919

FILED
May 02, 2006
Secretary of State**Entity Name:** NATALINA ENTERPRISES INC.**Current Principal Place of Business:**11300 N.W. 14TH COURT
PEMBROKE PINES, FL 33026**New Principal Place of Business:****Current Mailing Address:**11300 N.W. 14TH COURT
PEMBROKE PINES, FL 33026**New Mailing Address:****FEI Number:** 65-0748086**FEI Number Applied For** ()**FEI Number Not Applicable** ()**Certificate of Status Desired** (X)**Name and Address of Current Registered Agent:**RODRIGUES, ELAINE PTSD
11300 N.W. 14TH COURT
PEMBROKE PINES, FL 33026 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: RODRIGUES, ELAINE
Address: 11300 N.W. 14TH CT.
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VP () Delete
Name: WILCINSKI, JOSINETH
Address: 11300 N.W. 14TH CT.
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: FILOMENA, RODRIGUES
Address: 11300 N.W. 14TH CT.
City-St-Zip: PEMBROKE PINES, FL 33026

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: ELAINE RODRIGUES

PTSD

05/02/2006

Electronic Signature of Signing Officer or Director

Date