## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000070416

1701 NW 19TH AVE.

MIAMI, FL 33125

Address:

City-St-Zip:

Entity Name: COLINA AND SON CORPORATION

FILED Mar 27, 2006 Secretary of State

Entity Nai	me: COLINA	AND SON CORPORATION				
Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:		
2990 NW 2 MIAMI, FL			2990 NW 1 MIAMI, FL			
Current M	lailing Addro	ess:	New Maili	New Mailing Address:		
1701 NW 19TH AVE. MIAMI, FL 33125				1701 NW 19TH AVE. MIAMI, FL 33125 US		
FEI Number	: 65-0773415	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	l Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
COLINA, E 2990 N.W. L MIAMI, FL						
	named entity e of Florida.	submits this statement for the	purpose of changing	its registered o	ffice or registered agent, or both,	
SIGNATU	RE:					
	Electro	onic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financi	ng Trust Fund Contribution ( ).				
OFFICER	S AND DIRE	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( COLINA, ENF 1701 NW 191 MIAMI, FL 33	H AVE.	Title: Name: Address: City-St-Zip:	PD (X) COLINA, ENRIC 1701 NW 19TH MIAMI, FL 331	AVE.	
Title: Name: Address: City-St-Zip:	V ( COLINA, JOS 1701 NW 191 MIAMI, FL 33	H AVE.	Title: Name: Address: City-St-Zip:	VP (X) COLINA, JOSE 1701 NW 19TH MIAMI, FL 331	AVE.	
Title: Name: Address: City-St-Zip:	S ( COLINA, NOF 1701 NW 191 MIAMI, FL 33	H AVE.	Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name:	T ( COLINA, ISAI	) Delete BEL	Title: Name:	( )	Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: COLINA, ENRIQUE PD 03/27/2006