


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90230 034 \*\*\*150.00

<b>DOCUMENT # P97000071971</b> 1. Entity Name <b>I.L. INDUSTRIES CORP.</b>					
Principal Place of Business <b>1401 NW 88TH AVE MIAMI, FL 33172</b>			Mailing Address <b>1401 NW 88TH AVE MIAMI, FL 33172</b>		
2. Principal Place of Business <b>1430 NW 88th Ave</b>			3. Mailing Address <b>1430 NW 88th Ave</b>		
Suite, Apt. #, etc. 			Suite, Apt. #, etc. 		
City & State <b>Miami, FL</b>			City & State <b>Miami, FL</b>		
Zip <b>33172</b>			Zip <b>33172</b>		
Country <b>USA</b>			Country <b>USA</b>		
4. FEI Number <b>65-0784100</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>					
6. Name and Address of Current Registered Agent  <b>LAFEMINA, ROSE M 19495 BISCAYNE BLVD., STE. 609 AVENTURA, FL 33180</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 _____ (NOTE: Registered Agent signature required when reissuing) _____ DATE _____ <small>Signature typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D LAPCIUC, ISRAEL 1430 NW 88TH AVE. MIAMI, FL 33172</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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> _____ <b>4/26/06</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

40084391  
# P97000071971

# IL INDUSTRIES, CORP.

April 26, 2006

Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

REF: Document No. P97000071971  
2006 Profit Corp. Annual Report

To Whom It May Concern:

Enclosed please find check no. 1381 in the amount of US\$150.00 as payment in reference to the above-mentioned.

If you need any further assistance regarding this matter, please let us know.

Best regards,



Lilia Edith Aguado  
Property Manager  
IL Industries Corp