


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000002619
1. Entity Name
LUPA SHOES V, CORP.



Principal Place of Business Mailing Address
**7795 W. FLAGLER ST.
11
MIAMI, FL 33144** **7795 W. FLAGLER ST.
11
MIAMI, FL 33144**

DO NOT WRITE IN THIS SPACE



01122006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
65-0824019 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**GARCIA, FRANCISCO M
7795 W FLAGLER ST #37
MIAMI, FL 33144**

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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 reinstating) DATE _____

**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	D GARCIA, FRANCISCO M 7795 W FLAGLER ST #37 MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA, RAFAEL 7795 W FLAGLER ST #37 MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GARCIA, ANA L 7795 W FLAGLER ST #37 MIAMI, FL 33144
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

UNRECORDED
1/17/06-R0045-007 150.00

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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.

SIGNATURE: Francisco M Garcia 1/12/06 (305) 263-8636
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #