

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000026279	
1. Entity Name BERNA, INC.	

Principal Place of Business FABIO GOMEZ 384 COCONUT CIRCLE WESTON, FL 33326	Mailing Address 384 COCONUT CIRCLE WESTON, FL 33326
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01082006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0833872	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FABIO GOMEZ A 384 COCONUT CIRCLE FORT LAUDERDALE, FL 33326
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**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 _____ (Signature of officer or director of the corporation or the registered agent and the fee paid for the change of agent, signature, address and the name)	DATE _____

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

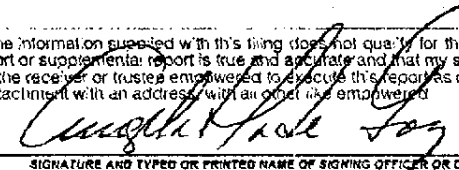
9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PRES GOMEZ, FABIO 384 COCONUT CIRCLE FORT LAUDERDALE, FL 33326
TITLE NAME STREET ADDRESS CITY ST ZIP	VP NARVAEZ, ANGELA M 384 COCONUT CIRCLE FORT LAUDERDALE, FL 33326
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05/03/06-80047-021 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information provided 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 an officer or employee.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/06 (954) 3452144