2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 02, 2005 08:00 AN **Secretary of State** DOCUMENT # P98000034027 PARAISO ASTURIANO, INC. Principal Place of Business Mailing Address 215 SW 17 AVE 215 SW 17 AVE STE 225 STE 225 MIAMI, FL 33135 MIAMI, FL 33135 04292005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0830819 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LASTRA, ROSALIA DO NOT WRITE 20025 RANCH ROAD MIAMI, FL 33189 IN THIS SPACE 3. The above named entity submits this state of Florida. I am familiar with, and accept the obligations of registered agent, 053248 LISTRS ne of registered agent and Mic (NOTE: Registered Agent signature required when retristating) Signature, typed or printed na 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. HILE MAME LASTRA, ROSALIA 20025 RANCH ROAD STREET ADDRESS U00000351433 05/02/05-80145-009 150.00 CITY-ST-ZIP MIAMI, FL 33189 HILE NAME STREET ADDRESS CHY SI-ZIP HILE NAME STREET ADDRESS DO NOT WRITE City-S1-ZiP IN THIS SPACE WILE NAME STREET ADDRESS City-ST ZIP MILE MANE STREET ADDRESS CHY-SI-ZIP HILF NAME STREET ADDRESS City-St-7IP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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

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changed, or on an attachment with an address

SIGNATURE:

FILED