

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 20, 2006 8:00 am**  
**Secretary of State**

03-20-2006 90021 023 \*\*\*150.00

<b>DOCUMENT # P98000057956</b>					
<b>1. Entity Name</b> <b>CROISSANT D'OR CORP.</b>					
<b>Principal Place of Business</b> 202 SE 1TH STREET MIAMI, FL 33132-2511			<b>Mailing Address</b> 202 SE 1TH STREET MIAMI, FL 33132-2511		
<b>2. Principal Place of Business</b>			<b>3. Mailing Address</b>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		<b>4. FEI Number</b> <b>65-0846664</b>	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>Applied For</b> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b>				<b>7. Name and Address of New Registered Agent</b>	
<b>COSTANELLES, ANA</b> <i>Castañeda, Ana</i> 20225 NE 34TH COURT APT 412 MIAMI, FL 33180				<b>Name</b>	
				<b>Street Address (P.O. Box Number is Not Acceptable)</b>	
				<b>City</b> <b>FL</b> <b>Zip Code</b>	
<b>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.</b>					
<b>SIGNATURE</b> _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>			<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>					
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>PSTD</b> <input type="checkbox"/> Delete <b>RIVERA, LUZ PATRICIA</b> 18180 GENEVA CT., APT. #B419 MIAMI, FL 33166				
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>MGR</b> <input type="checkbox"/> Delete <b>COSTANELLES, ANA</b> <i>Castañeda, Ana</i> 20225 NE 34TH COURT MIAMI, FL 33180				
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>					
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<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>					
<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>					
<b>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>					
<b>SIGNATURE:</b> <i>[Signature]</i> <b>3.16.06 3053505678</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

**50003769**



03092006 Chg-P CR2E034 (11/05)



ATTACHMENT

50003769

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 9, 2006

CROISSANT D'OR CORP.  
ATTN: ANA GASTANELLES  
202 S.E. 1TH STREET  
MIAMI, FL 33132

*Castaneda*

SUBJECT: CROISSANT D'OR CORP.  
Ref. Number: P98000057956

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/reinstatement application form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner  
Senior Section Administrator

Letter Number: 306A00016431