


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # P98000064937

1. Entity Name
TETRA "R" INVESTMENT, INC.



| | |
|---|---|
| Principal Place of Business 1770 SW 8TH ST MIAMI, FL 33135 US | Mailing Address 1770 SW 8TH ST MIAMI, FL 33135 US |
|---|---|



02152006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|---|--|
| 4. FEI Number 65-0851960 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**ALVARO CASTILLO B., P.A.
1390 BRICKELL AVE, SUITE 200
MIAMI, FL 33131**

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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 re-registering) 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**

**1000000437715
02/28/06-80057-003 163.75**

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D RUIZ, ENRIQUE 10340 NW 5 TERR MIAMI, FL 33172 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D RUIZ, ROBERTO 6108 SW 133 PL MIAMI, FL 33183 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D RUIZ, HORACIO 10730 SW 121 CT MIAMI, FL 33186 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D RUIZ, EDUARDO 10315 NW 9TH ST, CIR 302 MIAMI, FL 33172 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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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 persons empowered.

SIGNATURE: _____ DATE: **2-15-06** DAYTIME PHONE #: **305-649-1102**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR