

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000072127

Entity Name: FRANCISCO CLAVIJO, INC.

FILED  
Apr 27, 2006  
Secretary of State

**Current Principal Place of Business:**

8804 NW 109 TERR  
HIALEAH, FL 33018

**New Principal Place of Business:**

6231SW138CT  
K  
MIAMI, FL 33183

**Current Mailing Address:**

8804 NW 109 TERR  
HIALEAH, FL 33018

**New Mailing Address:**

6231SW138CT  
K  
MIAMI, FL 33183

FEI Number: 65-0875221

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLAVIJO, FRANCISCO A  
8804 NW 109 TERR  
HIALEAH, FL 33018 US

**Name and Address of New Registered Agent:**

CLAVIJO, FRANCISCO A  
6231SW138CT  
K  
MIAMI, FL 33183 US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

04/27/2006

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CLAVIJO, FRANCISCO A  
Address: 8804 NW 109 TERR  
City-St-Zip: HIALEAH, FL 33018

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CLAVIJO, FRANCISCO A  
Address: 6231SW138CT UNIT K  
City-St-Zip: MIAMI, FL 33183

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANCISCO A CLAVIJO

D

04/27/2006

Electronic Signature of Signing Officer or Director

Date