

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000087249

1. Entity Name
PRADOMAR CORPORATION



Principal Place of Business Mailing Address

901 PONCE DE LEON BLVD.
SUITE #603
CORAL GABLES, FL 33134

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SUITE #603
CORAL GABLES, FL 33134



01122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0926803	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALBORNOZ, WILLIAM H ESQ.
901 PONCE DE LEON BLVD., SUITE 603
CORAL GABLES, FL 33134

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IN THIS SPACE**

7. 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 _____ DATE _____

Signature of Registered Agent or Secretary of the Corporation Signature of Registered Agent or Secretary of the Corporation

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	8. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fee
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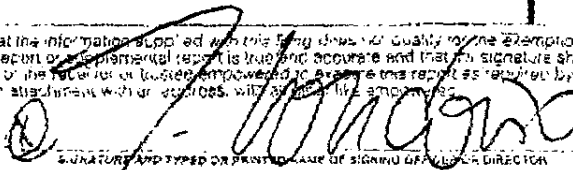
9. OFFICERS AND DIRECTORS

1. NAME LONDONO, JUAN FERNANDO	2. STREET ADDRESS 901 PONCE DE LEON BLVD., SUITE 603	3. CITY-STATE-ZIP CORAL GABLES, FL 33134
4. TITLE PRESIDENT	5. STREET ADDRESS CITY-STATE-ZIP	6. TITLE NAME STREET ADDRESS CITY-STATE-ZIP
7. NAME STREET ADDRESS CITY-STATE-ZIP	8. NAME STREET ADDRESS CITY-STATE-ZIP	9. NAME STREET ADDRESS CITY-STATE-ZIP

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05/18/06-80048-001 150.00

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IN THIS SPACE**

12. I hereby declare that the information supplied with this filing does not qualify for the exemptions contained in Chapter 193, Florida Statutes, and that the information indicated on this report or commercial report is true and accurate and that my signature shall have the same legal effect as if made under oath by me, an officer or director of the corporation or the person or persons empowered to prepare this report as required by Chapter 607, Florida Statutes, and that my name appears in Block "9" or Block "11" changed or on an attachment with or without, with or without, like amendments.

SIGNATURE:  19 Apr / 2006 (205) MM-1741

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR