FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P-980000 95578

1. Entity Name

FLORIDA INVESTORS CORPORATION



FILED May 23, 2006 8:00 am Secretary of State 05-23-2006 90011 047 ***150.00



	DO N	OT WRI	TE IN	THIS SF	PAC	E					
2. Principal Place of Business 20281 East Country Club Drive #902 SAME Suite, Apt. #, etc.								40094088	}		
				<u> </u>				400 80401WF	RITE IN THIS SPA	CE	
City & Stat Aventur	ra, Fl		City	& State SAM	ΙE		4	4. FEI Number 650878463		Applied For Not Applicable	
33180		Country Miami-Dade	Zip		Count	ry	5	5. Certificate of Status Desired		.75 Additional	
,		, , , ,			-	Name	7.	Name and Address of Curren	nt Registered Ag	ent	
DO NOT WRITE IN THIS SPACE					MESA JIII TAN D. Street Address (P.O. Box Number is Not Acceptable) 20281 F_COUNTRY_CLUB_DR. # 902						
•		**				City	ENTURA		FL	Zip Code 33180	
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 Signature recover when repaired agent and tills of applicable (NOTE Registered Agent signature required when remaining) DATE DATE											
January 1 - May 1 Fee is \$150.00 After May 1; Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State								9. Election Campaign F Trust Fund Contributi	· -	\$5.00 May Be Added to Fees	
10.	1	-	S AND DIRECTO		TOTAL C			NA.			
NAME STREET ADDRESS CHY-ST-ZIP	20281	Julian D./ E. Country ra, Fl.				T ADDRESS St-Zip					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mesa, Maria E./vice-president 20281 E. Country Club Dr. #902 Aventura, Fl. 33180				NAME STREE	T ADDRESS St-zip					
TITLE HAME STREET ADDRESS CITY-ST-ZIP	20281	Juliana M. E. Country ra, Fl. :	Club Dr.	ary #902		T ADDRESS ST-ZIP		DO NOT	WRIT	E	
NAME STREET ADDRESS CITY-ST-ZIP	,)		IN THIS	SPACI		
THLE NAME STREET ADDRESS CITY-ST-ZIP			,	·		t address St-ZIP			7: 1		
TITLE NAME STREET ADDRESS CITY-ST-ZIP											

12. I hereby certify that the information supplied with this filing 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

5-12-06

ATTACHMENT

<u>40094088</u> #P98000095578

May 11, 2006

Florida Dept.of State

Gentlemen:

We never received the card in order to get the Form.

My accountant checked if the payment was done and it was not.

Kindly request to accept the \$150.00 for year 2006.

Sincerely,

Milian D Mesa