

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 10, 2006 8:00 am**  
**Secretary of State**

05-10-2006 90107 015 \*\*\*150.00

<b>DOCUMENT # P99000023087</b>					
<b>1. Entity Name</b> CUPIDO CORPORATION					
<b>Principal Place of Business</b> 11001 S.W. 40TH STREET MIAMI, FL 32165 US			<b>Mailing Address</b> PO BOX 651087 MIAMI, FL 32165 US		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		<b>4. FEI Number</b> 65-0908629	
Zip		Country		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  MANRIQUE, RODRIGO 2710 S.W. 113TH COURT MIAMI, FL 33165			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code		
<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>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
<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>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE <input type="checkbox"/> Delete NAME <u>P.D. DE MANRIQUE, MARTHA C.</u> STREET ADDRESS <u>2710 S.W. 113TH COURT</u> CITY-ST-ZIP <u>MIAMI FL 33165</u>			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME <u>P.D. DE MANRIQUE, MARTHA C.</u> STREET ADDRESS <u>2710 S.W. 113TH COURT</u> CITY-ST-ZIP <u>MIAMI-FL 33165</u>		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME <u>S.D. MANRIQUE, TEDDY S.</u> STREET ADDRESS <u>2710 S.W. 113TH COURT</u> CITY-ST-ZIP <u>MIAMI FL 33165</u>		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
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<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> <u>X Martha Manrique (gr)</u> <u>05-01-06</u> <u>(305) 227-7167</u>					