

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000036292

FILED
Apr 20, 2006
Secretary of State

Entity Name: FARINAS INVESTMENTS & MANAGEMENT, INC.

Current Principal Place of Business:

16405 SW 73RD LANE
MIAMI, FL 33193 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 833325
MIAMI, FL 33283 US

New Mailing Address:

FEI Number: 65-0913159 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CONTRERAS, PAUL A ESQ.
7000 SW 97TH AVENUE
SUITE 209
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVD () Delete
Name: FARINAS, BRENDA G
Address: 16405 SW 73RD LANE
City-St-Zip: MIAMI, FL 33193 US

Title: ST (X) Delete
Name: FARINAS, BRENDA G
Address: 16405 SW 73RD LANE
City-St-Zip: MIAMI, FL 33193 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O/D (X) Change () Addition
Name: FARINAS, BRENDA GISELLE O/D
Address: P.O. BOX 833325
City-St-Zip: MIAMI, FL 33283 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRENDA GISELLE FARINAS

O/D

04/20/2006

Electronic Signature of Signing Officer or Director

_____ Date