2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # P990 1. Entity Name OLGA'S BANQUET HALL,		
Principal Place of Business 2500 SW 107 AVE # 9 MIAMI, FL 33165	Mailing Address 2500 SW 107 AVE # 9 MIAMI, FL 33165	



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING PEFICER OR DIRECTOR

No Chg-P CR2E034 (11/05) 04242006

4. FEI Number Applied For 65-0951870 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANCHEZ, OLGA 7401 SW 122 CT MIAMI, FL 33183

SIGNATURE:

DO NOT WRITE IN THIS SPACE

			1		
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, typed or printed name of registered agent and little if applicable (NOTE. Registered Agent signature required when reinstalling) DATE					
	Signature, types or printed have or registered agent and this	e ii applicable (VO1E. registere	G Agent signature	tradinised when tell statistics)	•
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	000000544245 05/11/06-80027-023 150.00
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SANCHEZ, OLGA 15765 SW 76TH TERR. MIAMI, FL 33193				
TITLE NAME STREET AODRESS CITY-ST-ZIP				_	
TITLE NAME STREET AODRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		IN ⁻	THIS SPACE
THILE NAME STREET ADDRESS GHY-ST-ZIP					· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP					-
12. I hereby certify that the information supplied with this filling 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 accuracy with all other like empowered.					