

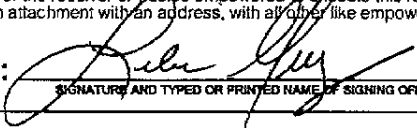


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000089436				
1. Entity Name MUGAR, INC.				
Principal Place of Business 7937 N.W. 53RD STREET MIAMI, FL 33166		Mailing Address 7937 N.W. 53RD STREET MIAMI, FL 33166		
<div style="text-align: right;">  04122006 No Chg-P CR2E034 (11/05) </div>				
			4. FEI Number 65-0953824	Applied For Not Applicable
			5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
			6. Name and Address of Current Registered Agent TRULLENQUE, ANTHONY L ESQ 7098 BONITA DRIVE MIAMI BEACH, FL 33141	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____				
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS MUNIZ, LILIA 427 MADEIRA AVE. CORAL GABLES, FL 33134			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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.				
SIGNATURE:  Lilia Muniz 4/18/06 305-5940845 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>				

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05/02/06-80132-004 150.00