

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P99000090445 1. Entity Name STEP STEAM IT CORP.						FILED 06 MAR 23 AM 8:15 HALL COUNTY, FLORIDA 	
Principal Place of Business 6993 NW 82 AVE 19 MIAMI, FL 33166				Mailing Address 6993 NW 82 AVE 19 MIAMI, FL 33166			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country				3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number 65-1135271				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent PEREZ, AYMEE 7220 SW 124 ST MIAMI, FL 33156				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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 reappointing) DATE</small>							
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVPS PEREZ, AYMEE 7220 SW 124 ST. MIAMI, FL 33156			TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS PEREZ, AYMEE 7220 SW 124 ST. MIAMI, FL 33156		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ, AYMEE 7220 SW 124 ST. MIAMI, FL 33156			TITLE NAME STREET ADDRESS CITY-ST-ZIP	800069049138 03/30/06--01037--004 **61.25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]			TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HERNANDEZ, ALBERTO 7220 SW 124 ST. MIAMI, FL 33156		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]			TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HERNANDEZ, HANSSEL 7220 SW 124 ST. MIAMI, FL 33156		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]			TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]			TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]		
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: <i>Aymee Perez</i> President				03/21/06 305-859-2730			