2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Mar 06, 2006 08:00 AM Secretary of State

DOCUMENT # P99000108096 1. Entity Name WESTERN OUTFITTERS, INC.					Secre	tary of State
Principal Plac 4835 SW 85 MIAMI, FL 3		Mailing Address 6183 MIAMI LAKES DR. EAST MIAMI LAKES, FL 33014		1 (99)(100))	
D	O NOT WRITE 6. Name and Address of Curren	E IN THIS SPA	CE	02202006 4. FEI Numb 65-096	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
VILLIOLDO 4835 SW 8 MIAMI, FL	O, ALBERTO 35 ST	DO NOT WRITE IN THIS SPACE				
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 title if applicable. [NOTE Registered Agent signature required when reinstating) DATE						
FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.				5.00 May Be ided to Fees		
10. TIFLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND PTR VILLOLDO, ALBERTO 4835 SW 85 ST MIAMI, FL 33145	D DIRECTORS }				
TITLE NAME STREET AUDRESS CITY-ST-ZIP					4000014 1- 30 14 (145)	457 5 58 8000 9-0 10 150 .00
TITLE NAME STREET ADDRESS CHY-ST-ZIP					NOT W	
NAME STREET ADDRESS CHY-ST-ZIP				IN '	this sf	PACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-TIP						
 12. I hereby of indicated of the corrections of the corrections. 	certify that the information supplied wit on this report or supplemental report poration or the receiver or trustee em, or on an attachment with an address,	h this filing does not quality for the ex- is true and accurate and that my signa powerell to execute this report as requi with at other like empowered.	emptions confain iture shall have the ired by Chapter 6	ed in Chapter 11: e same legal effe 07, Florida Statuti	9. Florida Statutes. t ct as if made under c es; and that my name	turther certify that the information path; that I am an officer or director appears in Block 10 or Block 11 If

2/27/2006

305-365.385

Daytima Phone #