


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 23, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S11171</b> 1. Entity Name <b>ROTAR PROPERTIES, INC.</b>	
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Principal Place of Business <b>1710 WAKEENA DR COCONUT GROVE, FL 33133-2438</b>	Mailing Address <b>1710 WAKEENA DR COCONUT GROVE, FL 33133-2438</b>
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03202006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>56-0229670</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  <b>ARGUELLO, ROBERTO 1710 WAKEENA DR. COCUNTO GROVE MIAMI, FL 33133</b>
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**DO NOT WRITE  
IN THIS SPACE**

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  - Roberto Arguello 3/21/06  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when relocating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing ☐ **\$5.00** May Be Added to Fees

000000478699  
04/08/06-80015-017 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALAZIO, JENNY 50 E. 89 ST. TH 52 NEW YORK, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARGUELLO, MATILDE 50 E. 89 ST. TH 52 NEW YORK, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARGUELLO, JR. R 1710 WAKEENA DRIVE COCONUT GROVE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:  - Roberto Arguello 3/21/06 305-371-856  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #