## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## DOCUMENT # S11561

1. Enilty Name

SON TRUST INTERNATIONAL INVESTMENT CORPORATION



Principal Place of Business

525 N.W. 27TH AVENUE SUITE 105

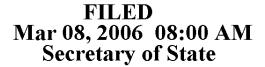
MIAMI, FL 33125-3085 US

Mailing Address

525 N.W. 27TH AVENUE

SUPPE 105

MIAMI, FL 33125-3085 US





01062006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0227191 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  $\Box$ Fee Required

6. Name and Address of Current Registered Agent

GARCIA-RUBIO, MANUEL J. 9630 SW 9 TERR MIAMI, FL 33174

## DO NOT WRITE IN THIS SPACE

			114	IIIIO OI ACL
8. The above the obligat	named entity submits this statement for the prisons of registered agent.	roose of changing its registered of	fice or registered <del>agen</del> t, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable. [PICITE: Registered Age	n signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financing     Trust Fund Contribution.     Added to Fees		
10.	OFFICERS AND DIREC	TORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARCIA, EDUARDO 525 NW 27TH AVENUE, #105 MIAMI, FL 33125			H00000459835
TITLE MAME STREET ADDRESS CITY-ST-ZIP	TD CHOCANO, JOSE J. ALEJANDRO DAUSTUA 159 MIRAFLORES LIMA PERU,			03/18/06-80049-002 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GARCIA-RUBIO, MANUEL J. 9630 SW 9 TER MIAMI, FL		DO	NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP			IN '	THIS SPACE
TITLE MAME STREET ADDRESS GITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby	certify that the information supplied with this fit	ng does not qualify for the exempt	ons contained in Chapter 11	9, Florida Statutes. I further certify that the information

indicated on this report or supplemental report is true and ecourate 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 507, 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: <

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touce

March 03, 2006

(305) 270-4690