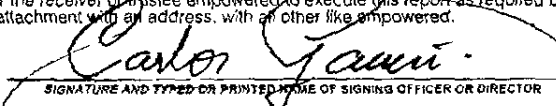


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # V30029 1. Entity Name GARMES INTERNATIONAL CORP.			
Principal Place of Business 7740 SW 89TH AVE MIAMI, FL 33173 US		Mailing Address 7740 SW 89TH AVE MIAMI, FL 33173 US	
DO NOT WRITE IN THIS SPACE			
		03102006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0344269	Applied For Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fes Required	
8. Name and Address of Current Registered Agent GARCIA, CARLOS 3921 NW 5TH STREET MIAMI, FL 33126		DO NOT WRITE IN THIS SPACE	
9. 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 _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000469967 03/27/06-80024-005 150.00
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD GARCIA, CARLOS 3921 NW 5TH STREET MIAMI, FL 33126		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VERA, HEIDY 7740 SW 89TH AVE MIAMI, FL 33173		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		3/14/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	