



**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 14, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # V41112</b> 1. Entity Name LA VILLETTA, INC.		
Principal Place of Business 4351 NORTH FEDERAL HIGHWAY BOCA RATON, FL 33431		Mailing Address 4351 NORTH FEDERAL HIGHWAY BOCA RATON, FL 33431
<b>DO NOT WRITE IN THIS SPACE</b>		
		 03122006 No Chg-P CR2E034 (11/05)
4. FEI Number 65-0338939		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent  COSTANZA, MARIA 4351 N FEDERAL HIGHWAY BOCA RATON, FL 33431		
		<b>DO NOT WRITE IN THIS SPACE</b>
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 <u>Chesira Costanza</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 DATE 06-06-2006 Added to Fees 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVSD COSTANZA, MARIA MIRRA 4351 N. FEDERAL HIGHWAY BOCA RATON, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FRAZIER, ROBERT W 2455 E. SUNRISE BLVD. STE. 600 FT. LAUDERDALE, FL 33304	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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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 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Chesira Costanza</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		