2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State
05-05-2006 90169 027 ***150.00

DOCUMENT # 590013

1. Entity Name
STUART J. WITTEN AND ASSOCIATES, INC.

Principal Place of Business	Mailing Address
8570 NW 68 ST MIAMI, FL 33166	8570 NW 68 ST MIAMI, FL 33166

2. Principal Place of Business	3. Mailing Address
7624 SW 146 CT	7624 SW 146 CT
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33183 Country: US	Zip: 33183 Country: US

04252006 Chg-P CR2E034 (11/05)

4. FEI Number: 59-1862675 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WITTEN, STUART 8570 NW 68 ST MIAMI, FL 33166	Name Street Address (P.O. Box Number is Not Acceptable): 7624 SW 146 CT City: MIAMI FL Zip Code: 33183

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WITTEN, STUART J. 8570 NW 68 ST MIAMI, FL 33166	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change 7624 SW 146 CT MIAMI FL 33183	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V WITTEN, LEON 8570 NW 68 ST MIAMI, FL 33166	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change 7624 SW 146 CT MIAMI FL 33183	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST WITTEN, GWEN C 8570 NW 68 ST MIAMI, FL 33166	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change 7624 SW 146 CT MIAMI FL 33183	☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change	☐ Addition

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: _____ STUART J WITTEN 4/27/06 305.970.4981
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #