2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750522

FILED Jan 18, 2006 Secretary of State

urrent P	rincipal Place	e of Business:	New Prince	cipal Place of Business:
O BOX 8 OCA RA	10982 TON, FL 3343	330982 US		
Current Mailing Address:		New Mail	New Mailing Address:	
O BOX 8 OCA RA	10982 TON, FL 3343	330982 US		
El Number	: 59-2602703	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and	Name and Address of New Registered Agent:	
IILTON, V	0./II A B.A			
	WOOD DR TON, FL 3343	33 US		
OCA RA	WOOD DR TON, FL 3343		purpose of changing	its registered office or registered agent, or botl
OCA RA	WOOD DR TON, FL 3343 named entity of Florida. RE:	submits this statement for the		
OCA RA	WOOD DR TON, FL 3343 named entity of Florida. RE:			its registered office or registered agent, or botl Date
OCA RA he above i the State	WOOD DR TON, FL 3343 named entity of Florida. RE:	submits this statement for the	ent	
OCA RA he above i the State	WOOD DR TON, FL 3343 e named entity e of Florida. RE: Electro S AND DIRECTORY D (PEREZ, MARIA	submits this statement for the nic Signature of Registered Agerones:) Delete A WOOD TERRACE	ent	Date
oca RA he above the State IGNATUI PFFICER: tte: ame: ddress:	WOOD DR TON, FL 3343 e named entity e of Florida. RE: Electro S AND DIREC D (PEREZ, MARIA 6446 BRIDGE BOCA RATON	submits this statement for the nic Signature of Registered Agerones:) Delete A WOOD TERRACE ,FL 33433) Delete Y	ent ADDITION Title: Name: Address:	Date NS/CHANGES TO OFFICERS AND DIRECTO D (X) Change () Addition PEREZ, MICHAEL 6446 BRIDGE WOOD TERRACE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM HILTON Ρ 01/18/2006