

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# N03000005348

Entity Name: PROFESA NATIONAL, INC.

Current Principal Place of Business:

9350 SUNSET DRIVE
112
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

PO BOX 524288
MIAMI, FL 33152

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORDERO, EDWIN
9350 SUNSET DRIVE
112
MIAMI, FL 33173 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CORDERO, EDWIN
Address: 9350 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV () Delete
Name: TORRES, LUIS
Address: 11202 SW 129TH PLACE
City-St-Zip: MIAMI, FL 33186

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS () Delete
Name: DIAZ, HECTOR
Address: 9250 SW 143RD COURT
City-St-Zip: MIAMI, FL 33186

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: LOPEZ, CONRADO
Address: 9913 NW 31 ST.
City-St-Zip: MIAMI, FL 33172

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CONRADO LOPEZ

D

05/01/2006

Electronic Signature of Signing Officer or Director

_____ Date