

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000081745

**FILED
Sep 26, 2006
Secretary of State****Entity Name:** LOYOLA WEALTH MANAGEMENT CORP.**Current Principal Place of Business:**701 BRICKELL AVE.
SUITE 2450
MIAMI, FL 33131**New Principal Place of Business:****Current Mailing Address:**701 BRICKELL AVE.
SUITE 2450
MIAMI, FL 33131**New Mailing Address:****FEI Number:** 20-0166721**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CASTELLON, CARLOS M CPA
LEON BLVD, SUITE 715
MIAMI, FL 33134 US**Name and Address of New Registered Agent:**ARAGON REGISTERED AGENTS, INC
999 PONCE DE LEON BLVD. #715
CORAL GABLES, FL 33134 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: ARAGON REGISTERED AGENTS

09/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DPST () Delete
Name: CASTILLO, CLAUDIA
Address: 156 ISLA DORADA BOULEVARD
City-St-Zip: CORAL GABLES, FL 33143Title: D () Delete
Name: CONTRERAS-PEREZ, MARGARITA
Address: 156 ISLA DORADA BLVD
City-St-Zip: CORAL GABLES, FL 33143Title: D () Delete
Name: CONTRERAS CALVA, JOSE LUIS
Address: 156 ISLA DORADA BLVD
City-St-Zip: CORAL GABLES, FL 33413Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: DVP (X) Change () Addition
Name: DOMENECH, JAIME
Address: 701 BRICKELL AVENUE, SUITE 2450
City-St-Zip: MIAMI, FL 33131Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: P () Change (X) Addition
Name: RODRIGUEZ, MIGUEL A
Address: 9915 W. OKEECHOBEE ROAD, #5408
City-St-Zip: HIALEAH GARDENS, FL 33016

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIGUEL A RODRIGUEZ

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09/26/2006

Electronic Signature of Signing Officer or Director

Date