## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000090943									1 (12.22)				
ADAPT TO YOUR NEEDS, INC.								_	IUN 27 AH				
Chinatest Diseased Dunings				Mailing Address				SEC	CRETARY CAL AHASSEE F	STATE			
Principal Place of Business P.O. BOX 160008				P.O. BOX 160008				IALL	Arteconta. P	1 (12.4.2	coll.	/	
MIAMI, FL 331			N	MIAMI, FL 33116							har I		
2. Principal Place of Business				3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.			04212006	Chg-P	CR2E	034 (11/05)	)		
City & State				City & State				4. FEI Numbe 20-0167			<del></del>	ot Applicable	
Zip	Country			Zip Coun			y 5. Certificate		of Status Desired		\$8.75 Ac		
<del></del>	6. Name	and Address	of Current Regis	tered Agent	<u> </u>			7. Name and	Address of New I	Registered			
Name													
BRANCA, C 1688 CORA MIAMI, FL (			Street Addre			P.O. Box Numbe	r is Not Acceptab	le)					
,		1	032			*		7-C-					
		/	·····		_//_	City	<u></u>			<u>Fl</u>	Zip Co		
			tatement for the p	ourpose of changing its	register	ed office of	redister	red agent, or boti	h, in the State of F	lorida. I am	femilier with	i, and accept	
SIGNATURE	the obligations of registered agent.  SIGNATURE  Signature Surgature, hoped or foregot name of projectioned agent and site of applicable. (INDITE. Registance Agent/sognature required when retristacting)  DATE  OATE												
FILE NOWILL FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees													
10.		OFFI	CERS AND DIRE		11.			ADDITIONS/	CHANGES TO OF	FICERS AN			
1	PD Delets III					1					☐ Change	☐ Addition	
i ' I	· ·												
<u> </u>	MIAMI, FL	33145			-	-ST-ZiP							
	VPD BRANCA, ZOE P.O. BOX 160008			☐ Delete		E E					Change	☐ Addition	
1						ET ADDRESS							
CTTY-ST-ZIP	MIAMI, FL 33116					-51-212							
TITLE NAME				☐ Delete	TOTAL						☐ Change	Addition	
STREET ADDRESS						EET ADDRESS							
CTTY-ST-ZIP					CiTY	-ST-ZIP							
TITLE				☐ Delete	TITU NAM	1			•		☐ Change	Addition	
NAME STREET ADDRESS						EFT ADDRESS							
CITY-ST-ZIP					CITY	-ST-ZIP							
TITLE				☐ Delete	TITE!	- 1		40	10077	nee	A Change	☐ Addition	
NAME STREET ADDRESS					•	ET ADDRESS		07/06.	)0077! /060105:	3001	**15	0.00	
CTTY+ST+ZIP					CITY	-ST-ZIP	•						
TITLE				Delete	HTU	1					Change	Addition	
NAME STREET ADDRESS					NAM STRE	EFT ADDRESS	_						
CITY-ST-ZIP					CITY	-ST-ZIP							
12. I hereby ce indicated o	ertily that the	information su t or supplemen	upplied with this t	liling does not qualify to and accurate and that	or the exempt signal	emptions co ture shall ha	ntained	d in Chapter 119 saprolegal effec	, Florida Statutes. t as if made under	I further ce oath; that I	rtily that the am an offici	information ar or director	
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 deport is true and faccurate and that my signature shall have the sapid 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.													
Lanca ( Muchanca 11201X													
SIGNAT	SIGNATURE: SIGNATURE AND TYPED OR PRINTED MANGE OF SKINNING DIFFER OR DIRECTOR DEED DEED DEED DEED DEED DEED DEED DE												