

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056132

FILED  
May 05, 2006  
Secretary of State

Entity Name: INDIVIDUALIZED PROPERTY CARE, INC.

## Current Principal Place of Business:

900 WEST AVE STE 331  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

407 LINCOLN RD  
SUITE 6B  
MIAMI BEACH, FL 33139

## Current Mailing Address:

900 WEST AVE STE 331  
MIAMI BEACH, FL 33139

## New Mailing Address:

1602 ALTON RD  
SUITE 93  
MIAMI BEACH, FL 33139

FEI Number: 04-3812400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DE LOEN, KIRK D ESQ  
44 W FLAGLER STREET STE 325  
MIAMI, FL 33130 US

## Name and Address of New Registered Agent:

CASTRO, CARLOS E  
407 LINCOLN RD  
SUITE 93  
MIAMI BEACH, FL 33139 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: CARLOS CASTRO

05/05/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: CASTRO, CARLOS E  
Address: 900 WEST AVE STE 331  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: CASTRO, CARLOS E  
Address: 1602 ALTON RD #93  
City-St-Zip: MIAMI BEACH, FL 33139

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: CARLOS CASTRO

DPS

05/05/2006

Electronic Signature of Signing Officer or Director

Date