2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 08, 2006 8:00 am Secretary of State 05-08-2006 90269 045 ***150 00

| DOCUMENT # P05000068577 1. Entity Name JORGE ERNESTO ELIAM, P.A. | | | | | . | 05-08-2006 | 90269 043 | , 130 | | |
|--|---|---------------------------------------|--|--|-------------------------|-------------------|---------------|--------------------------------|--|--|
| Principal Place of Business Mailing Address 1250 SOUTH MIAMI AVE., SUITE 914 MIAMI, FL 33131 MIAMI, FL 33131 MIAMI, FL 33131 | | | | | · | · | | | | |
| 2. Principal Place of Business 250 South Hiahl AV 3. Mailing Address 7105 W 85TYCC | | | | Т | | | | | | |
| Suite, Apt. #, etc. 1614 Suite, Apt. #, etc. | | | | | 04262006 | Chg-P | CR2E03- | | | |
| MIAMI Fl. MI | | | TIOMI, FL | | 4. FEI Numb | 20-28 | 33214 | ⊢ | plied For t Applicable | |
| 3 3 3 S | 3130 Country | 33144 | Country | | 5. Certificate | of Status Desired | | 8.75 Add ee Required | | |
| | 6. Name and Address of Current F | Registered Agent | Name | _ | 7. Name and | Address of New | Registered Ac | jent | | |
| ELIAM, JORGE E 1250 SOUTH MIAMI AVE., SUITE 914 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| MIAMI, FL 33131 | | | | 1250 SOUTH MIAMI AVE. STC 1614 | | | | | | |
| City | | | | IAM | MMI, FL FL Zip Code | | | | | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | | | | | | |
| SIGNATURE (NOTE: Registered Agent signature required when reinstating) bate | | | | | | | | | | |
| 1 | 7 | | | | | | | | | |
| | E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0 | 9. Election Campaig Trust Fund Contri | | \$5. ! Adde | 00 May Be ed to Fees | | • | | | |
| After M | ay 1, 2006 Fee will be \$550.0 | Trust Fund Contri | bution. | \$5.1 Adde | ed to Fees | CHANGES TO OF | | | | |
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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 report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation 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.

SIGNATURE: DOYGE C CLICIT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-20-06

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