

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 19, 2006  
Secretary of State**

DOCUMENT# P05000120514

Entity Name: SEMINAR BUILDERS, INC.

**Current Principal Place of Business:**

6450 BELLA CIRCLE #1205  
BOYNTON BEACH, FL 33437

**New Principal Place of Business:**

**Current Mailing Address:**

6450 BELLA CIRCLE #1205  
BOYNTON BEACH, FL 33437

**New Mailing Address:**

FEI Number: 20-3392505      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SILBERSWEIG, ADAM  
6450 BELLA CIRCLE #1205  
BOYNTON BEACH, FL 33437      US

**Name and Address of New Registered Agent:**

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

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: P                      ( ) Delete  
Name: MONSIGNORE, JASON  
Address: 4170 S PINE ISLAND ROAD  
City-St-Zip: DAVIE, FL 33328

Title: VP                      ( ) Delete  
Name: SILBERSWEIG, ADAM  
Address: 6450 BELLA CIRCLE #1205  
City-St-Zip: BOYNTON BEACH, FL 33437

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

SIGNATURE: JASON MONSIGNORE

PRES

05/19/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date