

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000084870

FILED
Apr 21, 2006
Secretary of State

Entity Name: VANTAGE POINT OFFICE CENTER, INC.

Current Principal Place of Business:

4699 NORTH FEDERAL HIGHWAY
POMPANO BEACH, FL 33064

New Principal Place of Business:

10321 EL PARAISO PLACE
DELRAY BEACH, FL 33446

Current Mailing Address:

10321 EL PARAISO PLACE
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 65-0701624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRYZAK, EDWARD L
10321 EL PARAISO PLACE
DELRAY, FL 33446 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KRYZAK, EDWARD L
Address: 10321 EL PARAISO PLACE
City-St-Zip: DELRAY, FL 33446

Title: VPD () Delete
Name: KRYZAK, NANETTE
Address: 10321 EL PARAISO PLACE
City-St-Zip: DELRAY, FL 33446

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: EDWARD L KRYZAK

CEO

04/21/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date