2066 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 08, 2006 8:00 am Secretary of State

03-08-2006 90178 023 ***150.00

DOCUMENT #F79143

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Principal Place of Business 201 S. BISCAYNE BOULEVARD 1500 MIAMI CENTER STE 1500(RIS) MIAMI, FL 33131						LIBRITA MIL	026804			
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02202006	Chg-P	CR2E0	34 (11/05)	. <u> </u>
City & State			City & State		4. FEI Numbe 59-2361) 	oplied For of Applicable	
Zip		Country	Zip	Cour	ntry		of Status Desired		\$8.75 Add Fee Require	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name					
CORPORATION COMPANY OF MIAMI 201 SOUTH BISCAYNE BOULEVARD 1500 MIAMI CENTER STE 1500(RJS) MIAMI, FL 33131					Street Address (P.O. Box Number is Not Acceptable)					
					City	<u> </u>	<u> </u>	FL	Zip Code	e
	lions of regis	ered agent.	for the purpose of changing	its register	red office or regis	tered agent, or both	n, in the State of Fid	orida. I am	familiar with,	and accept
	Signature, typed	or printed metro of registerest legal.	a and trie if applicable. (N	OTE: Registers	ed Agoral signature requi	red when remalatry;		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.						j				
FIL After M	E NOW!!! ay 1, 200	6 Fee will be \$550	.00 Trust Fund Co			5.00 May Be dded to Fees				
After Ma	ay 1, 200	FEE IS \$150.00 6 Fee will be \$550 OFFICERS AND	D DIRECTORS	ontribution.		ADDITIONS/	CHANGES TO OFF	ICERS AND		
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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 report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with any address, with all other like empowered.

SIGNATURE:

RY Charley Signature and typed or printed name of signing officer or director