## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000086797

Entity Name: PEGASUS FINANCIAL SERVICES, INC.

FILED May 02, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2121 PONCE DE LEON BLVD SUITE 330 2700 NORTHEAST 15 STREET CORAL GABLES, FL 33134 FORT LAUDERDALE, FL 33304

**Current Mailing Address: New Mailing Address:** 

2121 PONCE DE LEON BLVD SUITE 330 POST OFFICE BOX 7317 CORAL GABLES, FL 33134 FORT LAUDERDALE, FL 33304

FEI Number: 41-2182231 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

ORTIZ, MICHAEL MARTINEZ-MORAN, TERESITA MS. 2700 NORTEAST 15 STREET 2121 PONCE DE LEON BLVD SUITE 330 CORAL GABLES, FL 33134 FORT LAUDERDALE, FL 33304 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: TERESITA MARTINEZ-MORAN 05/02/2006

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

Title: () Delete Title: (X) Change ( ) Addition ORTIZ, MICHAEL SPATEN, OLE R DIR Name: Name: 2121 PONCE DE LEON BLVD SUITE 330 2700 NORTHEAST 15 STREET Address: Address:

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: () Delete Title: ( ) Change (X) Addition BOTHA, JOHAN A DIR Name: Name: 2700 NORTHEAST 15 STREET Address: Address: FORTLAUDERDALE, FL 33304 US City-St-Zip: City-St-Zip:

Title: Title: () Delete ( ) Change (X) Addition Name: MARTINEZ-MORAN, RETESITA DIR Name: 2700 NORTHEAST 15 STREET Address Address: City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33304 US

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: OLE RONALD SPATEN DIR 05/02/2006