2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 157698

Entity Name: MIAMILLINGOLN MERCURY INC.

FILED Jan 06, 2006 Secretary of State

Littly Name: WilAWI LINGOLN WERGORT, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:	
8101 NW 7 MIAMI, FL					
Current Mailing Address:			New Maili	New Mailing Address:	
8101 NW 7 MIAMI, FL					
FEI Number:	: 59-0873507	FEI Number Applied For()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	R, GLENN ECOND AVE. ERDALE, FL	33304 US			
	named entity e of Florida.	submits this statement for the pu	rpose of changing it	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Agen	t	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D'ANGELO, F 3339 CARAMB) Delete A, OLA CIRCLE SOUTH EEK, FL 33066	Title: Name: Address: City-St-Zip:	ST (X) Change () Addition D'ANGELO, FRANCESCO A 1014 NW 105TH AVE PLANTATION, FL 33322	
Title: Name: Address: City-St-Zip:	DC (HOLMAN, J S, 350 STATION A HADDONFIELD		Title: Name: Address: City-St-Zip:	DC (X) Change () Addition HOLMAN, JOSEPH S 350 STATION AVE HADDONFIELD, NJ	
Title: Name: Address: City-St-Zip:	EVP (TURNER, GLO 5910 NW 99 A PARKLAND, FI	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (MULLIN, KATH 727 PADDOCK MORRISTOWN	(PATH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (CARISS, WILL 6 DOVER LAN MEDFORD, NJ	E	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	GARDNER, GL 911 NE 2ND A		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: FRANCESCO D'ANGELO ST 01/06/2006