

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 260998

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: PRIDE-ODORITE OF FLORIDA INC

## Current Principal Place of Business:

93 NE 166 STREET  
NORTH MIAMI BEACH, FL 33162 US

## New Principal Place of Business:

2425 NW 24 STREET  
MIAMI, FL 33142 US

## Current Mailing Address:

PO BOX 420026  
MIAMI, FL 33242 US

## New Mailing Address:

FEI Number: 59-0978080      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MARTINEZ, AMADO  
93 NE 166 STREET  
NORTH MIAMI BEACH, FL 33162 US

## Name and Address of New Registered Agent:

MARTINEZ, AMADO  
2425 NW 24 STREET  
MIAMI, FL 33142 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:

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: MARTINEZ, AMADO  
Address: 93 NE 166 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

Title: VP ( ) Delete  
Name: MARTINEZ, ALICIA  
Address: 93 NE 166 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: MARTINEZ, AMADO  
Address: 2425 NW 24 STREET  
City-St-Zip: MIAMI, FL 33142 US

Title: VP (X) Change ( ) Addition  
Name: MARTINEZ, ALICIA  
Address: 2425 NW 24 STREET  
City-St-Zip: MIAMI, FL 33142 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: ALICIA MARTINEZ

VP

04/24/2006

Electronic Signature of Signing Officer or Director

Date