

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 429026

FILED  
Feb 14, 2006  
Secretary of State

Entity Name: EDWARD A. MATSON, INC.

**Current Principal Place of Business:**

2101 SOUTH ANDREWS AVE  
103  
FT. LAUDERDALE, FL 33316 US

**New Principal Place of Business:**

**Current Mailing Address:**

2101 SOUTH ANDREWS AVE  
103  
FT. LAUDERDALE, FL 33316 US

**New Mailing Address:**

FEI Number: 59-1471582      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TANGORA, C DAVID  
200 SE 18TH CT  
FT. LAUDERDALE, FL 33316 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: MATSON, EDWARD,  
Address: 1606 SE 12TH CT.  
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: V ( ) Delete  
Name: CIPOLATO, MICHAEL,  
Address: 8550 SW 109 AVE #222  
City-St-Zip: MIAMI, FL

Title: V ( ) Delete  
Name: LOWE, STEVEN,  
Address: 2723 S DAYTONA AVE.  
City-St-Zip: FLAGLER BCH, FL

Title: V ( ) Delete  
Name: MATSON, DAVID  
Address: 516 NE 12 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: V ( ) Delete  
Name: VIZCAINO, WILLIAM  
Address: 2645 SW 24 TERRACE  
City-St-Zip: MIAMI, FL 33145

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 A. MATSON

PD

02/14/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date