

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 445101

FILED
Sep 20, 2006
Secretary of State**Entity Name:** ANDREU & ASSOCIATES, INC.**Current Principal Place of Business:**275 S.W. 14TH AVE.
POMPANO BEACH, FL 330693231**New Principal Place of Business:****Current Mailing Address:**275 S.W. 14TH AVE.
POMPANO BEACH, FL 330693231**New Mailing Address:****FEI Number:** 59-1521621**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ANDREU, JOSE
275 SW 14TH AVENUE
POMPANO BEACH, FL 33069 US**Name and Address of New Registered Agent:**ANDREU, JOSE
275 SW 14TH AVENUE
POMPANO BEACH, FL 33069 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: JOSE ANDREU

09/20/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANDREU,JOSE,
Address: 4201 TRANQUILITY DR
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: D () Delete
Name: ANDREU,MARIA T,
Address: 4201 TRANQUILITY DR
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: VP () Delete
Name: SILVEIRA, ARTURO
Address: 4221 TRANQUILITY DR
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANDREU, JOSE
Address: 4201 TRANQUILITY DR
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: D (X) Change () Addition
Name: ANDREU, MARIA T
Address: 4201 TRANQUILITY DR
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: SRVP (X) Change () Addition
Name: SILVEIRA, ARTURO
Address: 4221 TRANQUILITY DR
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: VP () Change (X) Addition
Name: RODRIGUEZ, JOSE F
Address: 222 BELLA VISTA WAY
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VP () Change (X) Addition
Name: TROYER, GARY L
Address: 6200 NE 21 RD.
City-St-Zip: FT. LAUDERDALE, FL 33308

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: JOSE ANDREU

PD

09/20/2006

Electronic Signature of Signing Officer or Director

Date