


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 09, 2006 8:00 am
Secretary of State

02-20-2006 90048 012 ***150.00

DOCUMENT # 504259 1. Entity Name PEREZ & COMPANY, CERTIFIED PUBLIC ACCOUNTANTS, PROFESSIONAL ASSOCIATION	
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Principal Place of Business 201 E. KENNEDY BLVD. #420 TAMPA, FL 33602 US	Mailing Address 201 E. KENNEDY BLVD. #420 TAMPA, FL 33602 US
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01132006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1669671	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PEREZ, FRANK JR. 201 KENNEDY BLVD #420 TAMPA, FL 33602
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEREZ, FRANK JR. 201 E KENNEDY BLVD #420 TAMPA, FL 33602
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PEREZ, FRANK, III 201 E KENNEDY BLVD #420 TAMPA, FL 33602
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: _____ Daytime Phone: _____



ATTACHMENT

66004264

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 22, 2006

PEREZ & COMPANY, CERTIFIED PUBLIC ACCOUNTANTS, PROFESSI
201 E. KENNEDY BLVD.
#420
TAMPA, FL 33602 US

Subject: PEREZ & COMPANY, CERTIFIED PUBLIC ACCOUNTANTS,

Reference Number:

504259

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RM

ANNUAL REPORTS SECTION