## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 03, 2006 8:00 am Secretary of State

DOCU	MENT # 771192			02-03-2006	90020 010 ****	51.25		
1. Entity Nam								
2750 MCFARLANE ROAD 275			Mailing Address 2750 MCFARLANE ROAD COCONUT GROVE, FL 33133		00810-			
Principal Place of Business 3. N		3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01112006 C	hg-NP	CR2E037 (11/05)		
City & State		City & State		4. FEI Number 59-063848		Ar	plied For	
Zip	Country	Zip	Country	5. Certificate of S		□ \$8.75 Add		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
o. Italie and Address of Current Registered Agent				Name				
MOORE, MICHAEL ESQ MOORE AND COMPANY			Street Add	Street Address (P.O. Box Number is Not Acceptable)				
355 ALHAMBRA CIRCLE, SUITE 1100 CORAL GABLES, FL 33134							<b></b>	
00.0.0			City			FL Zip Cod	9	
9 The above	named entity submits this statement for	or the purpose of changing its	ragistared office or re	pointaged agent as beth in	the Ctate of Flor			
	ions of registered agent.	or the purpose of changing its	s registered onice or re	gistered agent, or both, ii	TITIE STATE OF FIOR	nua. Tam familiar with,	and accept	
SIGNATURE .					·			
	Signature, typed or printed name of registered agen	and the rappicable. (NO:	E: Registered Agent signature	required when reinstating)	<del>,</del>	DATE		
Filing Fee is \$61.25 Due by May 1, 2006			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees  Make check payable to Florida Department of State			
10.	OFFICERS AND DI	RECTORS	11.		I SES TO OFFICER			
TITLE	PSW	☐ Delete		ADDITIONS/CHANG		S AND DIRECTORS IN		
NAME	COCHRANE, CAMILLA	L Delete	TITLE	ADDITIONS/CHANG		IS AND DIRECTORS IN Change		
STREET ADDRESS			NAME	ADDITIONS/CHANG			10	
CITY-ST-ZIP		C Delice	NAME STREET ADDRESS	ADDITIONS/CHANG			10	
	MIAMI, FL 33143		NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANG		☐ Change	10 Addition	
TITLE	MIAMI, FL 33143	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANG			10	
NAME	MIAMI, FL 33143 D ARTHURS, GARY		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ADDITIONS/CHANG		☐ Change	10 Addition	
	MIAMI, FL 33143		NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANG		☐ Change	10 Addition	
NAME STREET ADDRESS	MIAMI, FL 33143  D  ARTHURS, GARY 1621 MICANOPY AVENUE	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ADDITIONS/CHANG		☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	MIAMI, FL 33143  D ARTHURS, GARY 1621 MICANOPY AVENUE MIAMI, FL 33133		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANG		☐ Change	10 Addition	
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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 reports 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an agtress, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

BEYNON, LORETTA

MIAMI, FL 33143

7865 CAMINA REAL #L403

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-06

3053220319

Daytime Phone #