

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006767

Entity Name: N126CH, INC.

FILED
Feb 21, 2006
Secretary of State

Current Principal Place of Business:

2930 BISCAYNE BOULEVARD
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

2930 BISCAYNE BOULEVARD
MIAMI, FL 33137

New Mailing Address:

FEI Number: 20-3811117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTENBURY, SHARON ESQ.
2930 BISCAYNE BOULEVARD
MIAMI, FL 33137 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: PVC () Delete
Name: GALBUT, RUSSELL W
Address: 2930 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137

Title: V () Delete
Name: CHRISTENBURY, SHARON
Address: 2930 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137

Title: S () Delete
Name: DACHOH, SHLOMO
Address: 2930 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137

Title: T () Delete
Name: ZDON, JOSEPH
Address: 2930 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137

Title: AT () Delete
Name: DE AMALGRO, PABLO
Address: 2930 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137

Title: C () Delete
Name: KAHN, SONNY
Address: 2930 BISCAYNE BOULEVARD
City-St-Zip: MIAMI, FL 33137

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:

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: IRMA VAZQUEZ

ACCT

02/21/2006

Electronic Signature of Signing Officer or Director

Date