

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13368

FILED
Jan 13, 2006
Secretary of State

Entity Name: SARINO R. COSTANZO, PROFESSIONAL ASSOCIATION

Current Principal Place of Business:

12515 KENDA 11 DR.
SUITE 324
MIAMI, FL 33186 US

New Principal Place of Business:

12515 KENDALL DR.
SUITE 324
MIAMI, FL 33186 US

Current Mailing Address:

12515 KENDA 11 DR.
SUITE 324
MIAMI, FL 33186 US

New Mailing Address:

12515 KENDALL DR.
SUITE 324
MIAMI, FL 33186 US

FEI Number: 65-0037886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSTANZO, SARINO R
12515 N. KENDALL DR.
SUITE 324
MIAMI, FL 33186 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: VPS () Delete
Name: COSTANZO, SARINO R,
Address: 2250 SW 3RD AVE #100
City-St-Zip: MIAMI, FL 33129 US

Title: PTD () Delete
Name: COSTANZO, SARINO R
Address: 12515 N. KENDALL DRIVE SUITE 324
City-St-Zip: MIAMI, FL 33186

Title: VPS () Delete
Name: COSTANZO, SARINO R
Address: 12515 N. KENDALL DRIVE SUITE 324
City-St-Zip: MIAMI, FL 33186

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:

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: SARINO R. COSTANZO

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01/13/2006

Electronic Signature of Signing Officer or Director

Date