

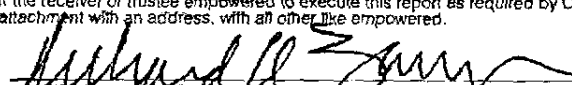


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 30, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # G03719</b> 1. Entity Name <b>RICHARD A. ZAMBO, P.A.</b>		
Principal Place of Business <b>1334 SE MACARTHUR BLVD STUART, FL 34996</b>		Mailing Address <b>1334 SE MACARTHUR BLVD STUART, FL 34996</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
		
01062006 No Chg-P CR2E034 (11/05)		
4. FEI Number <b>59-2282654</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required
6. Name and Address of Current Registered Agent  <b>ZAMBO, RICHARD A 598 SW HIDDEN RIVER AVE PALM CITY, FL 34990</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 registering) _____ DATE _____ <small>Signature, typed or printed name of registered agent and fee if applicable</small>		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
<b>10. OFFICERS AND DIRECTORS</b>		<b>U00000486060 04/13/06-80023-003 150.00</b>  <b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DP ZAMBO, RICHARD A 1334 SE MACARTHUR BLVD STUART, FL 34996	
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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 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 607, 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>3-28-06</b> <small>Date</small> <b>772-225-5400</b> <small>Daytime Phone #</small>

Richard A. Zambo