
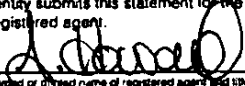



**2006 FOR PROFIT CORPORATION  
AMENDED ANNUAL REPORT**

**FILED**

06 DEC 15 PM 4:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # G08519					
1. Entity Name TERREMARK MANAGEMENT SERVICES, INC.					
Principal Place of Business 1717 NORTH BAYSHORE DRIVE SUITE 208 MIAMI, FL 33132 US			Mailing Address 1717 NORTH BAYSHORE DRIVE SUITE 208 MIAMI, FL 33132 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2298159	
Zip		Country		Applied For Not Applicable	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SICHTA, ROBERTS D 2601 S BAYSHORE DR 9TH FL MIAMI, FL 33133			Name Corporate Creations Network Inc Street Address (P.O. Box Number is Not Acceptable) 11380 Prosperity Farms Road #221E City Palm Beach Gardens FL Zip Code 33410		
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: 			Angela E. Howard Assistant VP		DATE 12/14/06
Amended AR is \$61.25			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MEDINA, MANUEL D.		NAME	Adam T. Smith	
STREET ADDRESS	2601 SOUTH BAYSHORE DRIVE, 9TH FL		STREET ADDRESS	2601 South Bayshore Drive, Suite 900	
CITY-ST-ZIP	MIAMI, FL 33133		CITY-ST-ZIP	Miami, FL 33133	
TITLE	DP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEGRERA, JOSE		NAME		
STREET ADDRESS	2601 SOUTH BAYSHORE DRIVE, 9TH FL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33133		CITY-ST-ZIP		
TITLE	AS	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SICHTA, ROBERT D		NAME		
STREET ADDRESS	2601 S BAYSHORE DR, 9TH FL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33133		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: 			T. Ball as attorney in fact for Adam Smith		DATE 12/14/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE		



12142006 Chg-P CR2E034 (12/06)

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