

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G98767

FILED
Jan 30, 2006
Secretary of State

Entity Name: VISTA PUBLISHING CORPORATION

Current Principal Place of Business:

1201 BRICKELL AVENUE, SUITE 360
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1201 BRICKELL AVENUE, SUITE 360
MIAMI, FL 33131

New Mailing Address:

FEI Number: 59-2378791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVY, BUDDY
2203 N LOIS AVE, SUITE 912
TAMPA, FL 33607 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: PD () Delete
Name: ESTRADA, ALFREDO J
Address: 1201 BRICKELL AVE. SUITE 360
City-St-Zip: MIAMI, FL 33131

Title: DC () Delete
Name: ESTRADA, ALFRED
Address: 1201 BRICKELL AVE. SUITE 360
City-St-Zip: MIAMI, FL 33131

Title: SD () Delete
Name: LEVY, BUDDY,
Address: 2203 N. LOIS AVE SUTIE 912
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ESTRADA, ALFREDO J
Address: 1201 BRICKELL AVE. SUITE 360
City-St-Zip: MIAMI, FL 33131

Title: PCD (X) Change () Addition
Name: ESTRADA, ALFRED
Address: 1201 BRICKELL AVE. SUITE 360
City-St-Zip: MIAMI, FL 33131

Title: SD (X) Change () Addition
Name: LEVY, BUDDY,
Address: 2203 N. LOIS AVE SUITE 912
City-St-Zip: TAMPA, FL 33607

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: BUDDY LEVY

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01/30/2006

Electronic Signature of Signing Officer or Director

Date