2006 FOR PROFIT CORPORATION ANNUAL REPORT

CCTY-ST-ZCP

SIGNATURE: *

changed, or on an attachment with an address, with all other like empowered.

Feb 01, 2006 08:00 AM **Secretary of State** DOCUMENT # H75897 1. Entity Name ROODENBURG PROPERTY SPECIALISTS, INC. Principal Place of Business Mailing Address 14391 S.W. 73 AVENUE 14391 S.W. 73 AVENUE MIAMI, FL 33158-1601 MIAMI, FL 33158-1601 01262006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEt Number 65-0137455 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent ROODENBURG, YOLANDA DO NOT WRITE 14391 S.W. 73 AVENUE MIAMI, FL 33158-1601 IN THIS SPACE 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 Signature, typed or printed name of replatered agent and title if applicable. (MOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 717) F NAME ROODENBURG, PIETER STREET ADDRESS 14391 S.W. 73 AVENUE H00000413795 02/11/06-80005**-008 150.00** CITY-ST-ZIP MIAMI, FL 331581601 TITLE ROODENBURG, YOLANDA NAME STREET ADDRESS 14391 S.W. 73 AVENUE CITY-ST-ZIP MIAMI, FL 331581601 TITLE NANE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS COTY-ST-ZIP TITLE NAME STREET ADDRESS

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 eath, 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

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STONATURE AND TYPED OR PRINTED NAME OF STONING OFFICER OR DIRECTO

FILED