2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 8:00 am Secretary of State

1. Entity Nam	MENT # H87985 E. MARTELL, P.A.					05-01-2006 90404 033 ***150.00					
Principal Plac	e of Business	Mailing Address				10010046					
717 PONCE DE LEON BLVD.		717 PONCE DE LEON BLVD. SUITE 319			. [
CORAL GABLES, FL 33134		CORAL GABLES, FL 33134				i 15618N 815	 	RIN SIBİL GIRIL G	ikii Bibli kid	MEET () (E E)	
2. Principal P	Place of Business	3. Mailing Address									
	.W. 72nd Street	9485 S.W. 72nd Street			eet	1 16 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	i rarrı ine iği rarar iğiği bin öl	ielt aren eietr a	IEN EIEN EIE	3189111881	
Suite, Apt. #, etc. A-265		Suite, Apt. #, etc. A-265				04102006 Chg-P CR2E034 (11/05)					
City & State Miami, FL		City & State Miami, FL		4. FEI Number 59-2606434				<u> </u>	oplied For ot Applicable		
Zip 33173	Country	Zip	Countr	-			of Status Desired		3.75 Add	ditional	
33173	USA 6. Name and Address of Current F	33173 Registered Agent	USA	<u> </u>	L	7. Name and	Address of New Reg		e Require	· d	
Na Na						ame MARTELL, PEDRO F.					
	, PEDRO F. SE DE LEON BLVD.		Street Address (P.O. Box Number is Not Acceptable) 9485 S.W. 72nd Street								
SUITE 319			ŀ	Suite A-265							
CORAL GABLES, FL 33134				City				FL	Zip Cod	e	
The above named shifty submits this statement for the oursoes of changing its register.					ed office or registered agent or both in the State of Flo				Zio Cod 3 3 1		
8. The above named entity submits this statement for the ourpose 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 04/10/06											
Signature hyped or printed name of registered agent and life if amplicable. (NOTE: Registered Agent signature required when reinstating) DATE PAGE ONTE											
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Fir Trust Fund Contributio				oing	\$5.0 Added	10 May Be d to Fees					
10.	OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFF					CERS AND DIRECTORS IN 11		
TITLE NAME	PSTD MARTELL, PEDRO F.	☐ Delete	TITLE					D	Change	Addition	
STREET ADDRESS	717 PONCE DE LEON BLVD.			T ADDRESS	948	5 S.W.	72nd St.,	Suit	e A-	-265	
CITY-ST-ZIP	CORAL GABLES, FL 33134	спу		-sr-zm Mia		ni, FL	33173				
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CITY-ST-ZIP		·	CITY	ST-ZIP						<u></u>	
TITLE		☐ Delete	TITLE	1					Change	Addition	
NAME STREET ADDRESS			•	T ADDRESS	1						

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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or vivise 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF BIOTHING OFFICER OR DIRECTOR

04/10/06 (305)275-0077