

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J22050

Entity Name: FAIR PRICE CORP.

FILED  
Mar 14, 2006  
Secretary of State

## Current Principal Place of Business:

25 SE 2ND AVE  
STE 200  
MIAMI, FL 33131 US

## New Principal Place of Business:

## Current Mailing Address:

25 SE 2ND AVE  
SUITE 200  
MIAMI, FL 33131 US

## New Mailing Address:

FEI Number: 59-2693553      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SOFFER, EMIL  
8251 SW 57 ST  
DAVIE, FL 33328 US

## Name and Address of New Registered Agent:

SOFFER, EMIL  
5523 SW 104 TERRACE  
COOPER CITY, FL 33328 US

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: EMIL SOFFER

03/14/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: SOFFER, EMIL,  
Address: 8251 SW 57 ST  
City-St-Zip: DAVIE, FL

Title: SECR ( ) Delete  
Name: JOELS, MANUEL,  
Address: 725 89 STREET  
City-St-Zip: SURFSIDE, FL 33154

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SECR (X) Change ( ) Addition  
Name: JOELS, MANUEL,  
Address: 1756 N. BAYSHORE DRIVE #19D  
City-St-Zip: MIAMI, FL 33132

Title: SECR ( ) Change (X) Addition  
Name: NUNES, ALESSANDRA PE, REIRA  
Address: 111 NE 2ND AVENUE #1502  
City-St-Zip: MIAMI, FL 33132

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: EMIL SOFFER

DP

03/14/2006

Electronic Signature of Signing Officer or Director

Date