2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #J45554

1. Entity Name

SUCHMAN CORPORATE PARK, INC.



FILED Apr 20, 2006 8:00 am Secretary of State 04-20-2006 90186 035 ***150.00

				7			
% Shane-Suchman Real Eastate Co. 1550 Madruga ave. #230		Mailing Address % SHANE-SUCHMAN REAL EASTATE CO. 1550 MADRUGA AVE. #230 CORAL GABLES, FL 33146			8/781 8/81 8/81 8/81 8/81 8/81	I) BHII BIBA BIBA BIDA BIDA	112111016 11 HBB1
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04182006	Chg-P	CR2E034 (11/0	5)
City & State		City & State		4. FEI Number Applied For 59-2776453 Not Applicable			
Zip	Country	Zip	Country	5. Certificate	of Status Desired	\$8.75 Fee Requ	
	6. Name and Address of Current		7. Name and	Address of New F	Registered Agent		
			1\am o				-
LAWRENCE E SUCHMAN 1550 MADRUGA AVE SUITE 230 CORAL GABLES, FL 33146			Street Address	s (P.O. Box Numbe	er is Not Acceptabl	le)	
			City			FL Zip C	ode
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. 1 am familiar with, and accept							
the obligations of registered agent.							
SIGNATURE.							
	Signature, typed or printed risme of registered eigent a	and title it applicable (NOTE Ri	egistered Agent signature requir	red when reinstating)		DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaign Trust Fund Contribu		5.00 May Be dded to Fees			ļ
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/	CHANGES TO OFF	FICERS AND DIRECT	DRS IN 11
TITLE	DP	☐ Delete	TITLE			Chang	e 🔲 Addition
NAME	SUCHMAN, CLIFFORD L.		NAME				
GTREET ADDRESS CITY-GT-ZIP	185 COCOPLUM ROAD MIAMI, FL 33143		STREET ADDRESS CITY - ST- ZIP				
TITLE	V	□ Delete	TITLE			Chanc	e 🔲 Addition
NAME	SUCHMAN, DANIEL A	☐ Delete	NAME				eAddition
STREET ADDRESS	328 MINORCA AVE.		STREET ADDRESS				
CITY-ST-ZIP	CORAL GABLES,, FL 33134		CITY-ST-ZIP				
TITLE	V	☐ Delete	TITLE			☐ Chang	e 🔲 Addition
NAME COSET APPROVA	L SUCHMAN, LAWRENCE E.		NAME				
STREET ADORESS CITY-SI-ZIP	1550 MADRUGA AVE. #230 CORAL GABLES,, FL 33146		STREET ADDRESS CITY-ST-ZIP				ļ
TITLE	ST ST	☐ Delete	DILE			☐ Chang	e 🔲 Addition
NAME	ROBERTS, PETER A	□ Detete	NAME			C Strang	e L. Addition
STREET ADDRESS	14930 S.W. 86 AVE		STREET ADDRESS				
CITY-ST-ZIP	MIAMI, FL		CITY-ST-ZIP				
TITLE		☐ Delete	TITLE			☐ Chang	e 🔲 Addition
NAME OFFET APPERIA			NAME CANTEST A CORDINA				
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
DILE		☐ Delete	TITLE			☐ Chanc	e 🔲 Addition
HACE		Uciete	11166				~ L
NAME			NAME				
NAME STREET ADDRECS		:	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 ooth; 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:

PET A. KS LOS PET PET SIGNATURE AND TYPED OR PRINTED HAME OF SIGNATURE OR DIRECTOR

305-667-6461