

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K30399

Entity Name: YCF CO.

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

3600 N.W. 37 COURT
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

3700 N.W. 37 COURT
MIAMI, FL 33142 US

New Mailing Address:

FEI Number: 65-0131017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELDMAN, LILY
3600 N.W. 37 COURT
MIAMI, FL 33142 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: D () Delete
Name: FELDMAN, LILY
Address: 3600 NW 377 COURT
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: FELDMAN, CHARLES
Address: 3600 NW 37 COURT
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: FRIER, SHARON
Address: 3600 NW 37 COURT
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LILY FELDMAN

D

04/27/2006

Electronic Signature of Signing Officer or Director

Date