2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L27532

Entity Name: LORETTA FABRICANT, C.P.A., P.A.

FILED Feb 23, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

LORETTA FABRICANT, CPA, PA 100 SE 2ND STREET 100 SE 2 ST 3910 **SUITE 2311** MIAMI, FL 33131 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

LORETTA FABRICANT, CPA, PA 100 SE 2ND STREET 100 SE 2 ST 3910 SUITE 2311 MIAMI, FL 33131 MIAMI, FL 33131

FEI Number: 65-0152198 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FABRICANT, LORETTA CPA FABRICANT, LORETTA CPA 100 SE 2ND ST., SUITE 3910 100 SE 2ND STREET MIAMI, FL 33131 SUITE 2311 MIAMI, FL 33131 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: 02/23/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: **PVST** (X) Change () Addition FABRICANT, LORETTA, FABRICANT, LORETTA Name: Name: 100 SE 2ND ST #3910 100 SE 2ND STREET, SUITE 2311 Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33131

Title: PST Title: (X) Change () Addition () Delete FABRICANT, LORETTA, Name: Name: FABRICANT, MICHAEL

100 SE 2ND ST #3910 Address: 100 SE 2ND STREET, SUITE 2311 Address:

MIAMI, FL MIAMI, FL 33131 City-St-Zip: 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: LORETTA FABRICANT **PVST** 02/23/2006