

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L90563

FILED
Apr 26, 2006
Secretary of State

Entity Name: PERSPECTIVES INTERNATIONAL, INC.

Current Principal Place of Business:

9594 DORAL BLVD
SUITE #106
MIAMI, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

9594 DORAL BLVD.
SUITE #106
MIAMI, FL 33178 US

New Mailing Address:

FEI Number: 65-0224664 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNDERWOOD, SARA
15580 SW 46TH LANE
MIAMI, FL 33185 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: UNDERWOOD, PAUL,
Address: 15580 SW 46TH LANE
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: UNDERWOOD, SARA,
Address: 15580 SW 46TH LANE
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: UNDERWOOD, PAUL,
Address: 15580 SW 46TH LANE
City-St-Zip: MIAMI, FL 33185 US

Title: D (X) Change () Addition
Name: UNDERWOOD, SARA,
Address: 15580 SW 46TH LANE
City-St-Zip: MIAMI, FL 33185 US

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: SARA J. UNDERWOOD

D

04/26/2006

Electronic Signature of Signing Officer or Director

_____ Date