## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Jan 12, 2006 08:00 AM Secretary of State

DOCUMENT # M64752  1. Entity Name JORGE E. OTERO & ASSOCIATES, P.A.				Secretary of State
75 VALENCI SECOND FLO		Mailing Address 75 VALENCIA AVENUE SECOND FLOOR CORAL GABLES, FL 33134	- <b>-</b>	A THERMAN AND ANNI ANNI AND
DO NOT WRITE IN THIS SPACE			CE	01062006 No Chg-P CR2E034 (11/05)  4. FEI Number Applied For S5-0020840 Not Applicable  5. Certificate of Status Desired
OTERO, JORGE E. 75 VALENCIA AVE., 2ND FLOOR CORAL GABLES, FL 33134				DO NOT WRITE IN THIS SPACE
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. I am famillar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees				
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND ON PVST OTERO, JORGE E. 75 VALENCIA AVE, 2ND FL CORAL GABLES, FL 33134	RECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u>8 - 8 - 2 - 4 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2</u>		U00000383811 01/13/06-80015-021 150.00
NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>	· ·	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		IN THIS SPACE
name Street address City-St-Zip	• • • • • • • • • • • • • • • • • • • •	- <u>عو</u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			- ·	
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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				