## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002618

FILED Feb 07, 2006 Secretary of State

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
2041 SW 70TH AVE., BLDG. D-11 DAVIE, FL 333177328			6900 SW 21ST CT UNIT 8 DAVIE, FL 33317	
		UNIT 8		
Current Mailing Address:		New Maili	New Mailing Address:	
2041 SW 70TH AVE., BLDG. D-11 DAVIE, FL 333177328		UNIT 8	6900 SW 21ST CT UNIT 8 DAVIE, FL 33317	
FEI Number: 20-25774	10 FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desired (X)	
Name and Address	s of Current Registered Agent:	Name and	Name and Address of New Registered Agent:	
OLIGENAL/CEE				
2400 E. LAS ÓLAS	BLVD., PMB 120			
SHOEMAKER, WIL 2400 E. LAS OLAS FORT LAUDERDAI The above named e in the State of Floric	BLVD., PMB 120 .E, FL 33301 US ntity submits this statement for the p	ourpose of changing	its registered office or registered agent, or both,	
2400 E. LAS OLAS FORT LAUDERDAI The above named e n the State of Floric	BLVD., PMB 120 .E, FL 33301 US ntity submits this statement for the p	ourpose of changing	its registered office or registered agent, or both,	
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2400 E. LAS OLAS FORT LAUDERDAI The above named e in the State of Floric SIGNATURE:	BLVD., PMB 120 .E, FL 33301 US  ntity submits this statement for the particular action of Registered Agreement for the particular action in Signature of Registered Agreement for the particular action in the particular form	ent		
2400 E. LAS OLAS FORT LAUDERDAI The above named e in the State of Floric SIGNATURE: Ele	BLVD., PMB 120 .E, FL 33301 US  ntity submits this statement for the particular action of Registered Agreement for the particular action in Signature of Registered Agreement for the particular action in the particular form	ent	Date	
2400 E. LAS OLAS FORT LAUDERDAI The above named e in the State of Florid SIGNATURE: Ele  OFFICERS AND D  Title: Name: Address:	BLVD., PMB 120 .E, FL 33301 US  ntity submits this statement for the parameters.  ectronic Signature of Registered Age	ent  ADDITION  Title:  Name:  Address:	Date  NS/CHANGES TO OFFICERS AND DIRECTOR  P ( ) Change (X) Addition  ROBERTS, ANDREW C MR.  3717 SW 50TH CT	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW C. ROBERTS P 02/07/2006