

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004196

FILED
May 01, 2006
Secretary of State

Entity Name: FLA CONFR ASSN OF 7 DAY ADV, INC.

Current Principal Place of Business:

12800 N. MIAMI AVE.
MIAMI, FL 331684637

New Principal Place of Business:

66 WEST FLAGLER STREET
#1002
MIAMI, FL 33130

Current Mailing Address:

12800 N. MIAMI AVE.
MIAMI, FL 331684637

New Mailing Address:

66 WEST FLAGLER STREET
#1002
MIAMI, FL 33130

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ZIDEL, MITCHELL J. ESQ.
80 SW 8TH STREET, STE. 1910
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

ZIDEL, MITCHELL J. ESQ.
155 SOUTH MIAMI AVENUE
PH-1D
MIAMI, FL 33130 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: MITCHELL ZIDEL

05/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CLARKE, CECIL
Address: 13025 NE 3RD AVE.
City-St-Zip: N. MIAMI, FL 33161

Title: DVP () Delete
Name: MELMOUTH, GREGORY
Address: 1245 NE 204 TERRACE
City-St-Zip: N. MIAMI BEACH, FL 33179

Title: DS () Delete
Name: RHODEN, BLOSSOM
Address: 1875 NE 132 ST.
City-St-Zip: N. MIAMI, FL 33161

Title: DT () Delete
Name: BCNAINE, DONALD
Address: 1100 NE 160TH TERRACE
City-St-Zip: N. MIAMI BEACH, FL 33162

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:

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

SIGNATURE: CECIL CLARKE

PD

05/01/2006

Electronic Signature of Signing Officer or Director

Date