2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0000001829

Entity Name: GO TO MARKET, INC.

Address:

City-St-Zip:

304 PALERMO AV

CORAL GABLES, FL 33134

FILED Apr 12, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7800 RED ROAD 9350 S. DADELAND BLVD. SUITE 200 STE 115 SOUTH MIAMI, FL 33143 MIAMI, FL 33156 **Current Mailing Address: New Mailing Address:** 7350 S. DADELAND BLVD. 7800 RED ROAD SUITE 200 STE 115 SOUTH MIAMI, FL 33143 MIAMI, FL 33156 FEI Number: 65-0973573 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: BLANCO, CARLOS 725 TIZIÁNO AVENUE CORAL GABLES, FL 33143 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BLANCO, CARLOS Name: Name: 725 TIZIANO AVENUE Address: Address: City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: Title: () Delete Title: () Change () Addition FRITZSIMONS, JIM Name: Name: 21886 PALM GRASS DR Address: Address: BOCA RATON, FL 33428 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition GARCIA, MERCEDES Name: Name: 11286 SW 92 PLACE Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: () Change () Addition DE LA HOZ, JÓRGE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: CARLOS BLANCO PD 04/12/2006