2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000050486

City-St-Zip:

CORAL GABLES, FL 33146

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
1680 NW 82ND AVE MIAMI, FL 33126	1680 NW 82ND AVE MIAMI, FL 33126 US
Current Mailing Address:	New Mailing Address:
1680 NW 82ND AVE MIAMI, FL 33126	1680 NW 82ND AVE MIAMI, FL 33126 US
FEI Number: 65-1016114 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
WASSERSTROM, BARRY 4621 HOLLYWOOD BLVD SUITE 100 HOLLYWOOD, FL 33021 US	
The above named entity submits this statement for the poin the State of Florida.	urpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Age	nt Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR

Title: () Delete Title: (X) Change () Addition LEVINSON, MATIAS LEVINSON, MATIAS Name: Name: 1500 SAN REMO AVE, STE 125 1680 NW 82ND AVE Address: Address: City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: MIAMI, FL 33126 US Title: () Delete Title: (X) Change () Addition LEVINSON, MATIAS LEVINSON, MATIAS Name: Name: Address: 1500 SAN REMO AVE, STE 125 Address: 1680 NW 82ND AVE CORAL GABLES, FL 33146 MIAMI, FL 33126 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition CUENCE, ANTONIO R Name: Name: CUENCE, ANTONIO R 1500 SAN REMO AVE, STE 125 Address: 1680 NW 82ND AVE Address:

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.

City-St-Zip:

MIAMI, FL 33126

SIGNATURE: MATIAS LEVINSON Ρ 04/25/2006