

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078748

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: SERVOLAB C.A., INC.

**Current Principal Place of Business:**

3900 N.W. 79 AVENUE  
SUITE 600-E  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

3900 N.W. 79 AVENUE  
SUITE 600-E  
MIAMI, FL 33166

**New Mailing Address:**

FEI Number: 65-1035902      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SUAREZ, ZOILO  
3900 N.W. 79TH AVE.  
600  
MIAMI, FL 33166 US

**Name and Address of New Registered Agent:**

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:**

Title: PD ( ) Delete  
Name: SUAREZ, ZOILO A  
Address: 3900 N.W. 79 AVENUE, STE. 600  
City-St-Zip: MIAMI, FL 33166

Title: TD ( ) Delete  
Name: MAGO, JOSE  
Address: 3900 N.W. 79 AVENUE, STE. 600  
City-St-Zip: MIAMI, FL 33166

Title: SD ( ) Delete  
Name: SUAREZ, NITZA  
Address: 3900 N.W. 79TH AVE, STE. 600 -E  
City-St-Zip: MIAMI, FL 33166

Title: V ( ) Delete  
Name: MARELLI, MIGUEL A  
Address: 6316 SW 136 CT G109  
City-St-Zip: MIAMI, FL 33183

Title: V ( ) Delete  
Name: BURZUA, CHISTIAN  
Address: 2801 NE 183 ST, 1211W  
City-St-Zip: AVENTURA, FL 33160

**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:

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

SIGNATURE: ZOILO SUAREZ

PD

04/24/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date