2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 12, 2006 08:00 AM Secretary of State

ANNOAL REPORT				Secretary of State			
1. Entity Nam	MENT # P000000863	382			Secre	ctary o	TState
Principal Plac	e of Business	Mailing Address		}			
13320 SW 1 MIAMI, FL 3	28TH ST.	13320 SW 128TH ST. Miami, FL 33186		}			
ાયાકપાયા, ૧૯ ૩	3100	IMMIMI, FL 33100		}			
]
DO NOT WRITE IN THIS SPACE				01042006 No Chg-P CR2E034 (11/05)			
			√ \$8.	75 Additional			
				5. Certificate	of Status Desired	Fee	Required
	6, Name and Address of Current Re	igistered Agent	}				
ZIMMERM	IAN, MICHAEL J		{	700	NOT ME	~17F	
13320 SW 128TH ST.				טט	NOT WI	KIIE	
MIAMI, FL 33186				IN T	THIS SP	ACE	
			}				
			<u> </u>				
 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. I am familiar with, and accept the obligations of registered agent. 							
SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE, Replatered Agent signature required when reinstaling) DATE							
- LANDONO353							
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	S. Election Campaign Final Trust Fund Contribution.		.00 May Be led to Fees	01/12/06-	8 0045-0;	22 158.75
10.	OFFICERS AND D	RECTORS	[
TITLE	D		3				
NAME STREET ADDRESS	BRODY, DAVID 13320 SW 128TH ST.		ŧ				
CITY-ST-ZIP	MIAMI, FL 33186		}				
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NAME			}				
STREET ADDRESS			1				
CITY-ST-ZIP			4				
TITLE NAME			ì				
STREET ADDRESS			ł	50			
CITY-ST-ZIP			1 .	DO	NOT W	KIIE	
TITLE				IN 7	THIS SP	ACE	
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STREET ADDRESS City-S1-ZIP			Į.				Į.
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NAME			1				j
STREET ADDRESS			ł				
CITY-ST-ZIP		يجد ره	1				
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NAME Street Address			•				į.
CITY-ST-ZIP			1				ļ
	certify that the information supplied with the	is filing does not qualify for the ex-	emptions contained	in Chanter 110	Florida Statutes 14	other certify the	at the information
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the comporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, withfall other like empowered.							
changed,	or on an attachment with an address, with	real other like empowered.	- I.		, , , , , , , , , , , , , , ,	-ppodia ili DiQ(IO OI DIOUR II II
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