## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000032958

City-St-Zip:

MIAMI BEACH, FL 33140

Entity Name: PRIVATE CLIENT RISK MANAGEMENT INC.

FILED May 02, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5959 COLI 1502 MIAMI BEA	LINS AVE ACH, FL 3314	0			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
5959 COLI 1502 MIAMI BEA	LINS AVE ACH, FL 3314	0			
FEI Number:	: 65-1139526	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
VACCARELLA, FRANCESCO 5959 COLLINS AVE 1502 MIAMI BEACH, FL 33140 US					
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution (  ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	VACCARELLA,	Delete FRANCESCO AVE APT. 1502	Title: Name: Address:	( ) Change ( ) Addition	

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: FRANCESCO VACCARELLA PRES 05/02/2006