## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

supplied with

of the corporation or the changed, or on an atta

SIGNATURE:

## FILED **DOCUMENT # P02000023404** 1. Entity Name 06 MAY -4 PM 4: 04 PROPERTY 4 CASH, CORP. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 4360 SW 97TH PLACE 4360 SW 97TH PLACE MIAMI, FL 33165 MIAMI, FL 33165 No Chg-P CR2E034 (11/05) 04252006 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 73-1630319 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BLANCO, PABLO A DO NOT WRITE 4360 SW 97TH PLACE MIAMI, FL 33165 IN THIS SPACE 8. 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 if applicable (NOTE Registered Agent signature required when reinstating DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS **PSTD** TITLE NAME BLANCO, PABLO A 4360 SW 97TH PLACE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33165 900075384829 05/26/06--01061--001 \*\*1361.25 NAME STREET ADDRESS CITY-\$1-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7/P IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADORESS CiTY-ST-ZIP his filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information rus and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director read to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if the appropriate the empowered. 12. I hereby certify that the information indicated on this report or supplement the comporation or the receiver by

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OF SIGNING OFFICER OR DIRECTOR