

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000064682

Entity Name: KAPZ FIRST INC.

FILED
May 26, 2006
Secretary of State

Current Principal Place of Business:

2222 PONCE DR. LEON BLVD.
150
MIAMI, FL 33134

Current Mailing Address:

2222 PONCE DR. LEON BLVD.
150
MIAMI, FL 33134

New Principal Place of Business:

2222 PONCE DR. LEON BLVD.
150
CORAL GABLES, FL 33134

New Mailing Address:

2222 PONCE DR. LEON BLVD.
150
CORAL GABLES, FL 33134

FEI Number: 01-0711458

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PABLO, SALAZAR
540 BRICKELL KEY DR #217
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

PABLO, SALAZAR
2222 PONCE DR. LEON BLVD., # 150
CORAL GABLES, FL 33134 US

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: PABLO SALAZAR

05/26/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: SALAZAR, PABLO
Address: 540 BRICKELL KEY DR. #217
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: SALAZAR, PABLO
Address: 2222 PONCE DR. LEON BLVD., # 150
City-St-Zip: CORAL GABLES, FL 33134

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: PABLO SALAZAR

PSD

05/26/2006

Electronic Signature of Signing Officer or Director

Date