

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080621

Entity Name: FERNANDEZ CARUS, P.A.

FILED
Mar 17, 2006
Secretary of State

Current Principal Place of Business:

370 MINORCA AVE.
STE. 14
CORAL GABLES, FL 33134

New Principal Place of Business:

345 ALMERIA AVENUE
CORAL GABLES, FL 33134

Current Mailing Address:

370 MINORCA AVE.
STE. 14
CORAL GABLES, FL 33134

New Mailing Address:

345 ALMERIA AVENUE
CORAL GABLES, FL 33134

FEI Number: 51-0420816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARUS, DARLENE F
370 MINORCA AVE.
STE. 14
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

CARUS, DARLENE F
345 ALMERIA AVENUE
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: DARLENE F. CARUS

03/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: FERNANDEZ, DARLENE C
Address: 3930 S.W. 2ND TERR.
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CARUS, DARLENE F
Address: 3910 S.W. 2ND TERR.
City-St-Zip: MIAMI, 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: DARLENE F. CARUS

PRES

03/17/2006

Electronic Signature of Signing Officer or Director

Date