2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 8:00 am Secretary of State 05-01-2006 90480 011 ***150.00

| DOCUMENT # P02000082581 1. Entity Name ACN & PARTNERS, INC. | | | | | | | | | 05-01-2006 | 5 90480 0 | 11 ***150 | 0.00 |
|--|--|-------------------------------------|--------------|---|--------------------|--|------------------------------|---------------------------|---------------------------|------------|---------------------------|-----------------------|
| Principal Place of Business 4149-BONIVA AVE MIAMI, FL 33133 | | | 4 | Mailing Address 4149 BONIVA AVE MIAMI, FL 33133 | | | | | A SHE REII STIII SANI | | 1881 8781 19181 118 | 1884 (I 1 98 1 |
| 2. Principal Place of Business 4149 BONITA AVENUE | | | | 3. Mailing Address 4149 BONITA AVENUE | | | | | | | | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | 04262006 | Chg-P | CR2E | 034 (11/05) | |
| City & State MIAMI, FL 33133 | | | | City & State MIAMI, FL 3 | | | 4. FEI Numb 55-078 | | | - | plied For t Applicable | |
| Zip | •., | Country Zip Cou | | ntry | | 5. Certificate | of Status Desired | ı 🗆 | \$8.75 Add Fee Require | | | |
| Name and Address of Current Registered Agent | | | | | | Name | | 7. Name and | Address of New | Registered | Agent | |
| DA COSTA NETO, ANTONIO F 4149 BONIVAÇAVE MIAMI, FL 33133 | | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | | 4149 BONITA AVENUE | | | | | | |
| | | | | | | City M | City MIAMI FL Zip Code 33133 | | | | | |
| 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 access the obligations of registered agent. | | | | | | | | | | | | and accept |
| SIGNATURE | | | | | | | | | | | | |
| - GIGINATION IL | Signature, typed | d or printed name of registered age | nt and title | if applicable. (NOT | ed Agent signature | required | t when reinstating) | 1 | DATE | | | |
| FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. | | | | | | | | .00 May Be led to Fees | | | | |
| 10. | OFFICERS AND DIRECTORS 11. | | | | | | | ADDITIONS | /CHANGES TO C | FFICERS AN | | |
| TITLE NAME | PD Delete ITITL DA COSTA NETO, ANTONIO F | | | | | I . | | | | | Change | Addition |
| STREET ADDRESS | 4149 BONITA AVENUE | | | | | EET ADDRESS (-ST-ZIP | | | | | | |
| TITLE | MIAMI, FL 33133 CITY | | | | | - | | | | | ☐ Change | Addition |
| NAME | NAM | | | | | | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | | | EET ADDRESS Y-ST-ZIP | | | | | | |
| TITLE | ☐ Delete TITLE | | | | | | | | | | Change | ☐ Addition |
| NAME STREET ADDRESS | S STR | | | | | | | | | | | |
| CITY-ST-ZIP | | | | | | Y-ST-ZIP | | | | | — | - Lass |
| TITLE NAME | | | | ☐ Delete | TITL NAM | | | | | | ☐ Change | Addition |
| STREET ADDRESS CITY-ST-ZIP | | | | | | EET ADDRESS Y-ST-ZIP | | | | | | |
| TITLE | ☐ Delete 1171£ | | | | | | | | | | ☐ Change | Addition |
| NAME STREET ADDRESS | | | | | NAM STR | ME EET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | | | Y-ST-ZIP | | | | | | |
| TITLE | | | | ☐ Delete | TITL | L L | | | | | ☐ Change | ☐ Addition |
| NAME STREET ADDRESS | | | | | | LEET ADDRESS | ſ | | | | | |
| CITY-ST-ZIP | | | Sale of t | CC d | | Y-\$1-ZIP | 1 | dia Charles | 0 Decide 01-11 | . I f | ا با د د باد د بازود | oform star |
| 12. I hereby certify that the information supplied with this filing 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 true 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 corporation 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, with all other like empowered. | | | | | | | | | | | | |
| SIGNAT | URF: | ANTONIO F. | DA (| COSTA NETO | | $ \mathcal{W}$ | W | V - | | 4/26/ | 06 | |
| | | SIGNATURE AND TYPED O | R PRINTE | D NAME OF SIGNING OFFICE | R OR DIRE | TOR | | | Date | | Daytime Phone # | |