

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000091853

Entity Name: ZACCARO-GRIMALDI, INC.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

6900 BISCAYNE BLVD.
SUITE 803
MIAMI, FL 33138

New Principal Place of Business:

7300 BISCAYNE BLVD
SUITE 402
MIAMI, FL 33138

Current Mailing Address:

9455 COLLINS AVENUE
SUITE 803
SURFSIDE, FL 33154

New Mailing Address:

7300 BISCAYNE BLVD
SUITE 402
MIAMI, FL 33138

FEI Number: 20-0001526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIMALDI, KARINA
6900 BISCAYNE BLVD.
SUITE 5
MIAMI, FL 33138 US

Name and Address of New Registered Agent:

GRIMALDI, KARINA
7300 BISCAYNE BLVD
SUITE 402
MIAMI, FL 33138 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: KARINA GRIMALDI

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRIMALDI, KARINA
Address: 6900 BISCAYNE BLVD.#5
City-St-Zip: MIAMI, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GRIMALDI, KARINA
Address: 7300 BISCAYNE BLVD, #402
City-St-Zip: MIAMI, FL 33138

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: KARINA GRIMALDI

PD

04/30/2006

Electronic Signature of Signing Officer or Director

Date