## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000024577

Entity Name: PUMA SYSTEMS, INC.

FILED Apr 03, 2006 Secretary of State

Current P	rincipal Place	of Business:	New Principa	New Principal Place of Business:		
	CKELL AVENUI OWER, SUITE 33131 US		SUITE 920	1000 BRICKELL AVENUE SUITE 920 MIAMI, FL 33131 US		
Current M	lailing Addres	s:	New Mailing	New Mailing Address:		
1101 BRICKELL AVENUE NORTH TOWER, SUITE 1003 MIAMI, FL 33131 US			STE 920	1000 BRICKELL AVENUE STE 920 MIAMI, FL 33131 US		
FEI Number	: 51-0452080	FEI Number Applied For ( )	FEI Number Not Applical	ble ( ) Certificate of Statu	ıs Desired ( )	
Name and	l Address of C	urrent Registered Agent:	Name and Ad	Name and Address of New Registered Agent:		
1581 BRIC APT. 601 MIAMI, FL The above	O, HUGO A CKELL AVENUI  33129 US named entity s e of Florida.		e purpose of changing its r	registered office or registered	l agent, or both,	
SIGNATU						
	Electron	ic Signature of Registered /	Agent	Date		
Election Car	mpaign Financing	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/0	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	FEDERICO, HÚ	L AVENUE, APT. 601	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	FEDERICO, RO	L AVENUE, APT. 601	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		

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: HUGO A FEDERICO DVP 04/03/2006