


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90185 009 ***150.00

DOCUMENT # P03000063270	
1. Entity Name YSABEL Y. PEREZ, P.A.	

Principal Place of Business 623 SW 11TH STREET SUITE 17 MIAMI, FL 33129-1040	Mailing Address 623 SW 11TH STREET SUITE 17 MIAMI, FL 33129-1040
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2. Principal Place of Business 8444 SW 148 Place	3. Mailing Address 8444 SW 148 Place
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Miami, FL.	City & State Miami, FL.
Zip 33193	Country USA

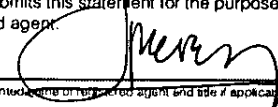
04142006 Chg-P CR2E034 (11/05)

4. FEI Number 65-1192148	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PEREZ, YSABEL Y 623 SW 11TH STREET SUITE 17 MIAMI, FL 33129-1040	
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7. Name and Address of New Registered Agent	
Name Ysabel Y Perez	
Street Address (P.O. Box Number is Not Acceptable) 8444 SW 148 Place	
City Miami	FL Zip Code 33193

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 accept the obligations of registered agent.	
SIGNATURE 	DATE 04/14/06

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE PD	<input type="checkbox"/> Delete
NAME PEREZ, YSABEL Y	
STREET ADDRESS 623 SW 11TH STREET SUITE 17	
CITY - ST - ZIP MIAMI, FL 331291040	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Ysabel Y Perez	
STREET ADDRESS 8444 SW 148 Place	
CITY - ST - ZIP Miami, FL. 333193	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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.	
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SIGNATURE: 	DATE 04/14/06	DAYTIME PHONE # 305.385.5956
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