## 2006 FOR PROFIT CORPORATION ANNUAL REPORT



DOCUMENT # P03000079605  1. Entity Name BEACON ANALYTICS, INC.							05-04-2006 9	0213 045	***150.	00
Principal Place of Business 1001 BRICKELL BAY DR. 30TH FLOOR MIAMI, FL 33131			Mailing Address 1001 BRICKELL BAY DR. 30TH FLOOR MIAMI, FL 33131		 	· ·	C+ <b>42</b> 1(6 1 <b>40)                                    </b>	B Riiki BŞIBI BII	**************************************	
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.		04112006	Chg-P	CR2E03	4 (11/05)		
City & State			City & State		4. FEI Number 45-0522			No	plied For t Applicable	
Zip			Zip	Country		L	of Status Desired	. г	8.75 Add	
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent  Name					
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4					Street Address (P.O. Box Number is Not Acceptable)					
WESTON, FL 33331										
					City	FL Zip Code				
	named entit tions of regist		or the purpose of changing its	register	ed office or register	ed agent, or both	, in the State of Flo	orida. I am fa	millar with,	and accept
SIGNATURE.	Signature, typed	or printed name of registered agent	and title if applicable. (NOT	E: Registere	d Agent signature required	when reinstating)		DATE		
FiL After M	E NOW!!! ay 1, 200	FEE IS \$150.00 6 Fee will be \$550.0	9. Election Campa Trust Fund Cont			.00 May Be ed to Fees				
10.		OFFICERS AND		11.	1	ADDITIONS/C	HANGES TO OFFI			
NAME STREET ADDRESS CITY-ST-ZIP	MIAMI, FL 33131 CITY							l	Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP	ZOMERFELD, FRANK 1001 BRICKELL BAY DR, # 3000 STR							1	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						Change	Addition
	l									☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Dolete		- 1				Change	_
NAME Street address			□ Delete	NAME STREI CITY- TITLE NAME STREI	E ET ADDRESS -ST-ZIP				☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREE	E ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP			1		

indicated on this report of suppreparation that it am an officer or director of the corporation or the receiver or trustee empowered to execute his 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 allidress, with all other like empowered.

We Seerty FRANK ZOMERFEID 5/1/06

THE NAME OF BIGNING OFFICER OF DIRECTOR

305 375-8005