## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P03000085518

Title:

Name:

Address:

City-St-Zip:

FILED Jan 29, 2007 Secretary of State

Entity Nan	ne: PRINCIPA	L PLANNING PARTNERS IN	IC.				
Current Principal Place of Business:				New Principal Place of Business:			
13831 SW 59TH STREET SUITE 100 MIAMI, FL 33183				1900 CORAL WAY SUITE 301 MIAMI, FL 33145			
Current Mailing Address:				New Mailing Address:			
270 CYPRESS DRIVE SUITE 1100 VILLAGE OF KEY BISCAYNE, FL 33149				270 CYPRESS DRIVE VILLAGE OF KEY BISCAYNE, FL 33149 US			
FEI Number:	87-0704247	FEI Number Applied For ( )	FEI Num	nber Not Appli	icable()	Certificate of Status	s Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SUITE 501 CORAL GA The above in the State	E DE LEON BOABLES, FL 331  named entity soof Florida.		purpose of	f changing it	ts registered	d office or registered	agent, or both,
SIGNATURE: Electronic Signature of Registered Agent				 Date			
OFFICERS AND DIRECTORS:  Title: PD ( ) Delete Name: BENACH JR, BIENVENIDO M PD				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  Title: ( ) Change ( ) Addition  Name:			
Address: City-St-Zip:		DRIVE SUITE 1100 Y BISCAYNE, FL 33149 US		Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	VD () DORTA-DUQUE 5645 SW 87TH MIAMI, FL 3314	STREET		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	JULIA, BENACH 270 CYPRESS			Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition JLIA C SD SS DR, SUITE 1100 KEY BISCAYNE, FL 33	149 US

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: BIENVENIDO M BENACH JR. PD01/29/2007

() Delete

VILLAGE OF KEY BISCAYNE, FL 33149 US

270 CYPRESS DR. SUITE 1100

AMPARO, GUTIERREZ D

(X) Change ( ) Addition

VILLAGE OF KEY BISCAYNE, FL 33149 US

BENACH, SARAH H D

270 CYPRESS DR. SUITE 1100