

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000113647

Entity Name: ACCESSIBLE RESOURCES, INC.

FILED  
Mar 19, 2006  
Secretary of State

## Current Principal Place of Business:

8960 S HOLLYBROOK BLVD.  
#301  
PEMBROKE PINES, FL 330251363 US

## Current Mailing Address:

8960 S HOLLYBROOK BLVD.  
#301  
PEMBROKE PINES, FL 330251363 US

FEI Number: 56-2406607

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEWART, DONNARAE  
9912 NW 41 STREET  
MIAMI, FL 33178 US

## New Principal Place of Business:

8960 S HOLLYBROOK BLVD.  
#301  
PEMBROKE PINES, FL 33025 US

## New Mailing Address:

8960 S HOLLYBROOK BLVD.  
#301  
PEMBROKE PINES, FL 33025 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: MR ( ) Delete  
Name: COOKE, OWEN  
Address: 8960 S HOLLYBROOK BLVD #301  
City-St-Zip: PEMBROKE PINES, FL 330251363

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: COOKE, OWEN  
Address: 8960 S HOLLYBROOK BLVD #301  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VP ( ) Change (X) Addition  
Name: COOKE, EMILY  
Address: 8960 S HOLLYBROOK BLVD #301  
City-St-Zip: PEMBROKE PINES, FL 33025

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: OWEN COOKE

P

03/19/2006

Electronic Signature of Signing Officer or Director

Date