

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124706

FILED
Mar 28, 2006
Secretary of State

Entity Name: MONAHAN-MIJARES CPA P.A.

Current Principal Place of Business:

MONAHAN-MIJARES CPA, P.A.
5201 BLUE LAGOON DR. SUITE 834
MIAMI, FL 33126

New Principal Place of Business:

MONAHAN-MIJARES CPA, P.A.
4000 PONCE DE LEON BLVD. STE 470 NO. 5
CORAL GABLES, FL 33146

Current Mailing Address:

MONAHAN-MIJARES CPA, P.A.
5201 BLUE LAGOON DR. SUITE 834
MIAMI, FL 33126

New Mailing Address:

CCS 10118
P.O. BOX 025323
MIAMI, FL 33102

FEI Number: 20-0394349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONAHAN, ROARK R CPA
20481 VIA MARISA
BOCA RATON, FL 33498 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: D () Delete
Name: MONAHAN MIJARES, ROARK R
Address: 5201 BLUE LAGOON DR. SUITE 834
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: PENA, TRINA A
Address: 5201 BLUE LAGOON DR. SUITE 834
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MONAHAN MIJARES, ROARK R
Address: 4000 PONCE DE LEON BLVD. STE 470 NO. 5
City-St-Zip: CORAL GABLES, FL 33146

Title: D (X) Change () Addition
Name: PENA, TRINA A
Address: 4000 PONCE DE LEON BLVD. STE. 470 NO. 5
City-St-Zip: CORAL GABLES, FL 33146

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: ROARK R MONAHAN

D

03/28/2006

Electronic Signature of Signing Officer or Director

Date