

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000130995

FILED  
Jun 12, 2006  
Secretary of State

Entity Name: CSMRI, INC.

## Current Principal Place of Business:

16233 MIRA VISTA LANE  
DELRAY BEACH, FL 33446 US

## New Principal Place of Business:

210 N UNIVERSITY DR.  
CORAL SPRINGS, FL 33071 US

## Current Mailing Address:

16233 MIRA VISTA LANE  
DELRAY BEACH, FL 33446 US

## New Mailing Address:

210 N UNIVERSITY DR  
CORAL SPRINGS, FL 33071 US

FEI Number: 20-0439456

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.  
1111 LINCOLN RD  
SUITE 400  
MIAMI BEACH, FL 33139 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: DALVA, JOEL  
Address: 16233 MIRA VISTA LANE  
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: VP ( ) Delete  
Name: DALVA, MARLENE  
Address: 16233 MIRA VISTA LANE  
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: TREA (X) Delete  
Name: DALVA, ADAM  
Address: 16233 MIRA VISTA LANE  
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: SECR (X) Delete  
Name: RUPPERT, SCOTT  
Address: 16233 MIRA VISTA LANE  
City-St-Zip: DELRAY BEACH, FL 33446 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: RUPERT, SCOTT K  
Address: 210 N UNIVERSITY DR  
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: VP (X) Change ( ) Addition  
Name: RUPERT, STACEY B  
Address: 210 N UNIVERSITY DR  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SCOTT RUPERT

PRES

06/12/2006

Electronic Signature of Signing Officer or Director

Date