

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000155030

FILED  
Mar 08, 2006  
Secretary of State

Entity Name: IREM LASH, P.A.

## Current Principal Place of Business:

3081 NE 183RD LN  
AVENTURA, FL 33160

## New Principal Place of Business:

3201 N.E 183RD STREET  
#603  
AVENTURA, FL 33160

## Current Mailing Address:

3081 NE 183RD LN  
AVENTURA, FL 33160

## New Mailing Address:

3201 N.E 183RD STREET  
#603  
AVENTURA, FL 33160

FEI Number: 04-3781607

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LASH, IREM  
3081 NE 183RD LN  
AVENTURA, FL 33160 US

## Name and Address of New Registered Agent:

LASH, IREM  
3201 N.E 183RD STREE  
#603  
AVENTURA, FL 33160 US

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: IREM LASH

03/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LASH, IREM  
Address: 3081 NE 183RD LN  
City-St-Zip: AVENTURA, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LASH, IREM  
Address: 3201 N.E 183RD STREET #603  
City-St-Zip: AVENTURA, FL 33160

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: IREM LASH

P

03/08/2006

Electronic Signature of Signing Officer or Director

Date