

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000034669

Entity Name: OLGA M. LAMERAN, P.A.

FILED
Apr 17, 2006
Secretary of State

Current Principal Place of Business:

1865 79TH ST CAUSEWAY
STE 7L
MIAMI, FL 33141

New Principal Place of Business:

5255 COLLINS AVENUE
STE 11G
MIAMI BEACH, FL 33140

Current Mailing Address:

1865 79TH ST CAUSEWAY
STE PHA
MIAMI, FL 33141

New Mailing Address:

5255 COLLINS AVENUE
STE 11G
MIAMI BEACH, FL 33140

FEI Number: 59-1405772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAMERAN, OLGA M
1865 79TH ST CAUSEWAY
STE PHA
MIAMI, FL 33141 US

Name and Address of New Registered Agent:

LAMERAN, OLGA M
5255 COLLINS AVE.
STE 11G
MIAMI BEACH, FL 33140 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:

04/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: LAMERAN, OLGA M
Address: 1865 79TH ST CAUSEWAY APT. PHA
City-St-Zip: MIAMI, FL 33141

Title: VD () Delete
Name: HURTADO, ADRIANA
Address: 1439 WEST AVENUE 201
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: LAMERAN, OLGA M
Address: 5255 COLLINS AVENUE, 11G
City-St-Zip: MIAMI BEACH, FL 33140

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: OLGA M. LAMERAN

PSTD

04/17/2006

Electronic Signature of Signing Officer or Director

Date