

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000047111

Entity Name: ABBIE B. CUELLAR, P.A.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

1680 MICHIGAN AVE
SUITE 919
MIAMI BEACH, FL 33139

New Principal Place of Business:

7100 BISCAYNE BLVD
SUITE 104
MIAMI, FL 33138

Current Mailing Address:

1680 MICHIGAN AVE
SUITE 919
MIAMI BEACH, FL 33139

New Mailing Address:

7100 BISCAYNE BLVD.
SUITE 104
MIAMI, FL 33138

FEI Number: 56-2444386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUELLAR, ABBIE B
1680 MICHIGAN AVE
SUITE 919
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

CUELLAR, ABBIE B
7100 BISCAYNE BLVD
SUITE 104
MIAMI, FL 33138 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:

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CUELLAR, ABBIE B
Address: 1680 MICHIGAN AVE SUITE 919
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CUELLAR, ABBIE B
Address: 7100 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33138

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: ABBIE B. CUELLAR

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date