

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060880

Entity Name: GOOD SIGNALS CORP

FILED  
Apr 17, 2006  
Secretary of State

## Current Principal Place of Business:

301 NE 51ST ST SUITE 2  
MIAMI, FL 33137 US

## Current Mailing Address:

301 NE 51ST ST SUITE 2  
MIAMI, FL 33137 US

## New Principal Place of Business:

1430 E MOWRY DR  
SUITE 207  
HOMESTEAD, FL 33033 US

## New Mailing Address:

1430 E MOWRY DR  
SUITE 207  
HOMESTEAD, FL 33033 US

FEI Number: 20-1189446

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OROZCO, MARTIN E SR  
301 NORTHEAST 51ST STREET  
SUITE 2  
MIAMI, FL 33137 US

## Name and Address of New Registered Agent:

OROZCO, MARTIN E  
1430 E MOWRY DR  
SUITE 7  
HOMESTEAD, FL 33033 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: MARTIN OROZCO

04/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OROZCO, MARTIN E SR  
Address: 301 NORTHEAST 51ST STREET SUITE 2  
City-St-Zip: MIAMI, FL 33137 US

Title: VP ( ) Delete  
Name: OROZCO, PATRICIA MS  
Address: 301 NORTHEAST 51ST STREET SUITE 2  
City-St-Zip: MIAMI, FL 33137 US

Title: S (X) Delete  
Name: OROZCO, BRENDA L MS  
Address: 301 NORTHEAST 51ST STREET SUITE 2  
City-St-Zip: MIAMI, FL 33137 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: OROZCO, MARTIN E  
Address: 1430 E MOWRY DR STE 207  
City-St-Zip: HOMESTEAD, FL 33033 US

Title: VP (X) Change ( ) Addition  
Name: OROZCO, BRENDA L  
Address: 1430 E MOWRY DR STE 207  
City-St-Zip: HOMESTEAD, FL 33033 US

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: MARTIN OROZCO

P

04/17/2006

Electronic Signature of Signing Officer or Director

Date