2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067115

Entity Name: MISTIC CONNECTION SPA CORP.

FILED Feb 02, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

900 WEST AVE #1533 5700 COLLINS AVENUE MIAMI BCH, FL 33139 4-D

MIAMI BCH, FL 33140

Current Mailing Address: New Mailing Address:

900 WEST AVE #1533 5700 COLLINS AVENUE MIAMI BCH, FL 33139 4D

MIAMI BCH, FL 33140

FEI Number: 20-2406281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAVERSAZZI, MARIA J
900 WEST AVENUE
1533
MIAMI BEACH, FL 33139 US

CAVERSAZZI, MARIA J
5700 COLLINS AVENUE
4-D
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: MARIA J. CAVERSAZZI 02/02/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CAVERSAZZI, MARIA J CAVERSAZZI, MARIA J Name: Name: 900 WEST AVE, APT 1533 Address: 5700 COLLINS AVENUE #4-D Address: City-St-Zip: MIAMI BCH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33140

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: MARIA J. CAVERSAZZI P 02/02/2006