# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 22, 2006 8:00 am**
**Secretary of State**
05-22-2006 90041 047 ***150.00

400936U9

DOCUMENT # P04000105909

1. Entity Name
PRIMISIA INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 630 DOUGLAS ROAD SUITE #3<br>MIAMI, FL 33054 | 630 DOUGLAS ROAD SUITE #3<br>MIAMI, FL 33054 |

**DO NOT WRITE IN THIS SPACE**

05152006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1400580
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

COHEN, LIDIA R
630 DOUGLAS ROAD SUITE #3
MIAMI, FL 33054

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS $150.00**
**Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

| | |
|---|---|
| TITLE | PTSD |
| NAME | COHEN, LIDIA R |
| STREET ADDRESS | 630 DOUGLAS ROAD SUITE #3 |
| CITY-ST-ZIP | MIAMI, FL 33054 |
| TITLE | |
| NAME | |
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| STREET ADDRESS | |
| CITY-ST-ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** L Cohen — LIDIA R. COHEN 5/15/06 (786)488-7555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 400936054
#P04000105909

PRIMISIA INC
630 Douglas Rd. 3
Miami, FL 33054
Monday, 05/15/2006

Div. of Corporations
P.O. Box 6
Tallahassee, FL 32314

RE: P04000105909

Dear Sir or Madam:

This is to attach the 2006 Annual Report for the corporation of the line of reference.

I did mark the box that I did not receive the Notice and having had serious health problems I missed the deadline.

I am attaching the Annual Report with the normal fee, before the deadline.

Thank you for your kind understanding.

Sincerely,

L Cohen

PRIMISIA INC.
By Lidia R. Cohen, President