

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108592

Entity Name: JUAN G. GARCIA, P.A.

FILED
Aug 31, 2005
Secretary of State

Current Principal Place of Business:

1250 BRICKELL AVE - STE 9
MIAMI, FL 33131

New Principal Place of Business:

305 GALEN DRIVE
APT 303
KEY BISCAYNE, FL 33149

Current Mailing Address:

1250 BRICKELL AVE - STE 9
MIAMI, FL 33131

New Mailing Address:

305 GALEN DRIVE
APT 303
KEY BISCAYNE, FL 33149

FEI Number: 20-1504349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LISETTE PIE SALAZAR, P.A.
260 CRANDON BLVD
48
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GARCIA, JUAN G
Address: 1250 BRICKELL AVE - STE 9
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARCIA, JUAN G
Address: 305 GALEN DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JUAN G. GARCIA

P

08/31/2005

Electronic Signature of Signing Officer or Director

Date