

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90132 001 ***900.00

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DOCUMENT # P04000127704 1. Entity Name LOISA & COMPANY, INC.					
Principal Place of Business 2450 SW 137TH AVENUE SUITE 234 MIAMI, FL 33175			Mailing Address 2450 SW 137TH AVENUE SUITE 234 MIAMI, FL 33175		
2. Principal Place of Business 1200 Brickell Ave Suite, Apt. #, etc. Ste 860		3. Mailing Address 1200 Brickell Ave Suite, Apt. #, etc. Ste 860			
City & State Miami, FL		City & State miami, FL		4. FEI Number 20-1823030 APPLIED FOR	
Zip 33131 Country		Zip 33131 Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LOPEZ, PETER M ESQ. 2450 SW 137TH AVENUE SUITE 234 MIAMI, FL 33175				7. Name and Address of New Registered Agent Name Peter M. Lopez, PA Street Address (P.O. Box Number is Not Acceptable) 1200 Brickell Ave. Ste 860 City miami FL Zip Code 33131	
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: 2/7/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GASPERINO N. LOIACONO GISONE 2450 SW 137TH AVENUE #234 MIAMI, FL 33175	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Gasperino N. Loiacono Gisone 1200 Brickell Ave, Ste 860 miami, FL 33131	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MISTRETTA, ANTONELLA S 2450 SW 137TH AVENUE #234 MIAMI, FL 33175	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D mistretta, Antonella S 1200 Brickell Ave, Ste 860 miami, FL 33131	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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:			Director 2/8/06		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		