## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000134310

**Entity Name: CHOICEBACKUP INC.** 

FILED Jan 14, 2006 Secretary of State

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

9132 SOUTHERN ORCHARD RD 2529 NW 49TH TER

FT LAUDERDALE, FL 33328 COCONUT CREEK, FL 33063

**Current Mailing Address: New Mailing Address:** 

2269 SOUTH UNIVERSITY DRIVE 2529 NW 49TH TER

#350 COCONUT CREEK, FL 33063 FT LAUDERDALE, FL 33324

FEI Number: 56-2481497 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:

RIVERA, LIDIANA ESQ ARCOS, LUIS A MR 12235 SW 148TH TERR 2529 NW 49TH TER

MIAMI, FL 33186 COCONUT CREEK, FL 33063 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: LUIS A. ARCOS 01/14/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete (X) Change ( ) Addition SOMOHANO, JULIO MR. DETTBARN, JASON MR. Name: Name:

2269 SOUTH UNIVERSITY DRIVE #350 2529 NW 49TH TER Address: Address:

City-St-Zip: FT LAUDERDALE, FL 33324 US City-St-Zip: COCONUT CREEK, FL 33063 US

Title: Title: (X) Change ( ) Addition () Delete

Name: DETTBARN, JASON MR. Name: ARCOS, LUIS A MR. 2269 SOUTH UNIVERSITY DRIVE #350 2529 NW 49TH TER Address: Address:

FT LAUDERDALE, FL 33324 US COCONUT CREEK, FL 33063 US City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition

ARCOS, LUIS A MR. Name: Name: 2269 SOUTH UNIVERSITY DRIVE #350 Address: Address: City-St-Zip: FT LAUDERDALE, FL 33324 US 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: LUIS A. ARCOS ST 01/14/2006