

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164141

FILED
Jun 26, 2006
Secretary of State

Entity Name: EXPEDITE IT PERMIT PROCESSING COMPANY

Current Principal Place of Business:

12210 S.W. 6 STREET
PEMBROKE PINES, FL 33025

New Principal Place of Business:

1062 S.W. DEAUVILLE AVENUE
PORT ST. LUCIE, FL 34953

Current Mailing Address:

12210 S.W. 6 STREET
PEMBROKE PINES, FL 33025

New Mailing Address:

1062 S.W. DEAUVILLE AVENUE
PORT ST. LUCIE, FL 34953

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JARAMILLO, AUDREY
12210 S.W. 6 STREET
PEMBROKE PINES, FL 33025 US

Name and Address of New Registered Agent:

JARAMILLO, AUDREY
1062 S.W. DEAUVILLE AVENUE
PORT ST. LUCIE, FL 34953 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:

06/26/2006

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: P () Delete
Name: LOVE, AUSTIN T
Address: 12210 S.W. 6 STREET
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VP () Delete
Name: STOLFI, AUGUST R
Address: 12210 S.W. 6 STREET
City-St-Zip: PEMBROKE PINES, FL 33025

Title: T () Delete
Name: STOLFI, AYDEN R
Address: 12210 S.W. 6 STREET
City-St-Zip: PEMBROKE PINES, FL 33025

Title: CEO () Delete
Name: STOLFI, AUDREY M
Address: 12210 S.W. 6 STREET
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOVE, AUSTIN T
Address: 1062 S.W. DEAUVILLE AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VP (X) Change () Addition
Name: STOLFI, AUGUST R
Address: 1062 S.W. DEAUVILLE AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: T (X) Change () Addition
Name: STOLFI, AYDEN R
Address: 1062 S.W. DEAUVILLE AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: CEO (X) Change () Addition
Name: STOLFI, AUDREY M
Address: 1062 S.W. DEAUVILLE AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953

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: AUDREY M.STOLFI

CEO

06/26/2006

Electronic Signature of Signing Officer or Director

Date