

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000010554

Entity Name: FLORENCIA SCHINOFF, INC.

FILED  
Feb 14, 2006  
Secretary of State

## Current Principal Place of Business:

15895 SW 55TH TERRACE  
MIAMI, FL 33185

## New Principal Place of Business:

15895 SW 55TH TERRACE  
MIAMI, FL 33185 US

## Current Mailing Address:

15895 SW 55TH TERRACE  
MIAMI, FL 33185

## New Mailing Address:

FEI Number: 80-0127772      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SCHINOFF, SERGIO  
16895 SW 55TH TERRACE  
MIAMI, FL 33185 US

## Name and Address of New Registered Agent:

PORCU, LAURA  
15895 SW 55TH TERRACE  
MIAMI, FL 33185 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: LAURA POCU

02/14/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: SCHINOFF, LAURA  
Address: 5895 SW 55TH TERRACE  
City-St-Zip: MIAMI, FL 33185

Title: VD ( ) Delete  
Name: SCHINOFF, SERGIO  
Address: 5895 SW 55TH TERRACE  
City-St-Zip: MIAMI, FL 33185

Title: SD ( ) Delete  
Name: SCHINOFF, FLORENCIA  
Address: 5895 SW 55TH TERRACE  
City-St-Zip: MIAMI, FL 33185

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: PORCU, LAURA  
Address: 15895 SW 55TH TERRACE  
City-St-Zip: MIAMI, FL 33185 US

Title: VD (X) Change ( ) Addition  
Name: SCHINOFF, SERGIO  
Address: 15895 SW 55TH TERRACE  
City-St-Zip: MIAMI, FL 33185 US

Title: SD (X) Change ( ) Addition  
Name: SCHINOFF, FLORENCIA  
Address: 15895 SW 55TH TERRACE  
City-St-Zip: MIAMI, FL 33185 US

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: LAURA PORCU

PRES

02/14/2006

Electronic Signature of Signing Officer or Director

Date