


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90421 038 ***150.00

DOCUMENT # P05000036074
 1. Entity Name
 LANDMARK SURVEYING AND MAPPING FIRM, INC.



Principal Place of Business Mailing Address
 P.O. BOX 941283 P.O. BOX 941283
 MIAMI, FL 33194 US MIAMI, FL 33194 US

2. Principal Place of Business 3. Mailing Address
 P.O. Box 941431 P.O. Box 941431
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 MIAMI, FLORIDA MIAMI, FLORIDA
 Zip Country Zip Country
 33194 33194



03292006 Chg-P CR2E034 (11/05)

4. FEI Number 20-2547350 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Name and Address of Current Registered Agent
 CABRERA, JORGE L
 2852 SW149 PLACE
 MIAMI, FL 33185
 7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00
 9. Election Campaign Financing Trust Fund Contribution. \$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	P CABRERA, JORGE L 2852 SW149 PLACE MIAMI, FL 33185 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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: Jorge L. Cabrera 3/27/06 (305)302-2522
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #