2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# P05000053552

Entity Name: HOLMES & ASSOCIATES, P. A.

Current Principal Place of Business:

540 N.W. 165TH STREET ROAD
SUITE 301-B
MIAMI, FL 33179

New Principal Place of Business:

4302 HOLLYWOOD BLVD.
#336
HOLLYWOOD, FL 33021

Current Mailing Address:

540 N.W. 165TH STREET ROAD
SUITE 301-B
MIAMI, FL 33179

New Mailing Address:

4302 HOLLYWOOD BLVD.
#336
HOLLYWOOD, FL 33021

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

Name and Address of Current Registered Agent:

HOLMES, KESHA M
540 N.W. 165TH STREET ROAD
SUITE 301-B
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

HOLMES, KESHA M
4302 HOLLYWOOD BLVD.
#336
HOLLYWOOD, FL 33021 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: 04/28/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HOLMES, KESHA M
Address: 540 NW 165TH STREET ROAD - SUITE 301-B
City-St-Zip: MIAMI, FL 33179

Title: S (X) Delete
Name: HOLMES, KESHA M
Address: 540 NW 165TH STREET ROAD - SUITE 301-B
City-St-Zip: MIAMI, FL 33179

Title: T (X) Delete
Name: HOLMES, KESHA M
Address: 540 NW 165TH STREET ROAD - SUITE 301-B
City-St-Zip: MIAMI, FL 33179

Title: D (X) Delete
Name: HOLMES, KESHA M
Address: 540 NW 165TH STREET ROAD - SUITE 301-B
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: HOLMES, KESHA M
Address: 4302 HOLLYWOOD BLVD.
City-St-Zip: HOLLYWOOD, FL 33021

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: KESHA M. HOLMES PSTD 04/28/2006
Electronic Signature of Signing Officer or Director — Date