2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000059531

FILED May 08, 2006 8:00 am Secretary of State 05-08-2006 90278 039 ***150.00

Mining Address Substitution Subs	1. Entity Nan REBECC		O.D., P.A.								
Surie, Apt. n. etc.	6005 S THIRD ST			6005 S THIRD ST							
City & State Since Address of Current Registered Agent To Name and Address of New Registered Agent Name Since Address of New Registered Agent To Name and Address of New Registered Agent Name City FL Zip Code City FL North City City FL North City City FL North City City FL North City City City FL North City City City FL North City C	2. Principal Place of Business			3. Mailing Address							
Zip County Zip County S. Control 5. Certificate of Status Desired \$8.75 Additional Pre- Street Address of Current Registered Agent 7, Name and Address of New Registered Agent 7, Name and Address of Ne	Suite, Apt. #, elc.			Suite, Apt. #, etc.			04252006	Chg-P	CR2E	034 (11/05)	
S. Certificate of Status Desired	,						4. FEI Numb	- - 05443	76	No	t Applicable
SIMS, REBECCA 6005 STHIRD ST TAMPA, FL 33611 City FL Zip Code	Zip	· · ·					<u> </u>			Fee Require	
SIMS, REBECCA BOOS STHRIDS T TAMPA, FL 33611 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or book, in the State of Florids. I am familiar with and acceptable the obligations of registered agent, or book, in the State of Florids. I am familiar with and acceptable the obligations of registered agent. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIFFECTORS OFFICERS AND DIFFECTORS III. ADOITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN III. NAME SIREST ADDRESS COTY-S1-2P TEMPA, FL 33Cs/I III.E NAME SIREST ADDRESS COTY-S1-2P Delete III.E NAME SIREST ADDRESS COTY-S1-2P COT		6. Name	and Address of Curren	t Registered Agent		* 					
R. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature Signature speed or profess name of registered agent and late a sublecable. (NOTE Registered Agent speadure required when retocation) DATE	6005 S THIRD ST										
THE NOWILI FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE Rebect Sims GOOSTALine STREET ADDRESS OITY-S1-78 TITLE ITILE ITILE						City			FL	Zip Codi	e
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STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	J			☐ Delete				*		☐ Change	Addition
	STREET ADDRESS CITY-ST-ZIP	certify that the	information supplied will	h this filing does not qualify to	STREE CITY	ET ADDRESS ST-ZIP	ed in Chapter 119	Florida Statutas 1	further con	tify that the is	formation

replaced on this report or suppremental 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR