

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000067720

FILED  
May 15, 2006  
Secretary of State

Entity Name: EXECUTIVE REAL ESTATE FAST SOLUTIONS, INC

## Current Principal Place of Business:

5200 SW 8TH ST., SUITE 205-A  
CORAL GABLES, FL 33134

## New Principal Place of Business:

5200 SW 8TH ST.  
205-A  
CORAL GABLES, FL 33134 US

## Current Mailing Address:

5200 SW 8TH ST., SUITE 205-A  
CORAL GABLES, FL 33134

## New Mailing Address:

5200 SW 8TH ST.  
205-A  
CORAL GABLES, FL 33134 US

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

## Name and Address of Current Registered Agent:

HECHAVARRIA, MAGELA  
5200 SW 8TH ST., SUITE 205-A  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

HECHAVARRIA, MAGELA  
5200 SW 8TH ST.  
205-A  
CORAL GABLES, FL 33134 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: \_\_\_\_\_

Electronic Signature of Registered Agent

05/15/2006

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: PD ( ) Delete  
Name: HECHAVARRIA, MAGELA  
Address: 5200 SW 8TH ST., SUITE 205-A  
City-St-Zip: CORAL GABLES, FL 33134

Title: VD ( ) Delete  
Name: CASTELLA, VIVIAN G  
Address: 5200 SW 8TH ST., SUITE 205-A  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HECHAVARRIA, MAGELA  
Address: 5200 SW 8TH ST., SUITE 205-A  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP (X) Change ( ) Addition  
Name: CASTELLA, VIVIAN G  
Address: 5200 SW 8TH ST., SUITE 205-A  
City-St-Zip: CORAL GABLES, FL 33134

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: MAGELA HECHAVARRIA

Electronic Signature of Signing Officer or Director

PD

05/15/2006

Date