

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000099058

FILED
Apr 06, 2006
Secretary of State

Entity Name: KESEFF TEAM CORP.

Current Principal Place of Business:

16375 NE 18TH AVE SUITE 304
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

16375 NE 18TH AVE
SUITE 322
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

16375 NE 18TH AVE SUITE 304
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

16375 NE 18TH AVE SUITE
SUITE 322
NORTH MIAMI BEACH, FL 33162

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

Name and Address of Current Registered Agent:

SERBER, DANIEL J ESQ
SERBER & ASSOCIATES, P.A.
2875 NE 191ST STREET SUITE 801
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: METTA, MOISES
Address: 16375 NE 18TH AVE SUITE 304
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D () Delete
Name: LABAN, DAVID
Address: 16375 NE 18TH AVE SUITE 304
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D () Delete
Name: SHREM, ANTONIO
Address: 16375 NE 18TH AVE SUITE 304
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: METTA, MOISES
Address: 16375 NE 18TH AVE SUITE 322
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D (X) Change () Addition
Name: LABAN, DAVID
Address: 16375 NE 18TH AVE SUITE 322
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D (X) Change () Addition
Name: SHREM, ANTONIO
Address: 16375 NE 18TH AVE SUITE 322
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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: DAVID LABAN

D

04/06/2006

Electronic Signature of Signing Officer or Director

Date