2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State
04-28-2006 90213 024 ***150.00

DOCUMENT # P05000112704

1. Entity Name
JANET T. MUNN, P.A.

50016903

Principal Place of Business	Mailing Address
~~200~~ 201 SOUTH BISCAYNE BLVD ~~41ST FLOOR~~ 15th Floor MIAMI, FL 33131-~~2398~~	~~200~~ 201 SOUTH BISCAYNE BLVD ~~41ST~~ 15th FLOOR MIAMI, FL 33131-~~2398~~

04242006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
201 South Biscayne Blvd.	201 South Biscayne Blvd
Suite, Apt. #, etc.: Suite 1500	Suite, Apt. #, etc.: Suite 1500
City & State: Miami, Fl	City & State: Miami, Fl
Zip: 33131 Country: USA	Zip: 33131 Country: USA

4. FEI Number — ☐ Applied For ☑ Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MUNN, JANET T
20~~0~~1 SOUTH BISCAYNE BLVD ~~41ST~~ 15th FLOOR
MIAMI, FL 33131-~~2398~~

7. Name and Address of New Registered Agent

Name: Janet T. Munn
Street Address (P.O. Box Number is Not Acceptable): 201 South Biscayne Blvd.
Suite 1500
City: Miami FL Zip Code: 33131

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: Janet T. Munn JANET T. Munn — 4/25/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	~~P~~ President ☐ Delete	TITLE	President ☑ Change ☐ Addition
NAME	MUNN, JANET T	NAME	Munn, Janet T.
STREET ADDRESS	20~~0~~1 SOUTH BISCAYNE BLVD ~~41ST~~ 15th FLOOR	STREET ADDRESS	201 South Biscayne Blvd. 15th Floor
CITY-ST-ZIP	MIAMI, FL 33131~~2398~~	CITY-ST-ZIP	Miami, Fl 33131
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: Janet T. Munn JANET T. Munn, Pres. 4/26/06 3054159459
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #