2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000113626

8249 NW 36TH STREET, SUITE 120

() Delete

8249 NW 36TH STREET, SUITE 120

DORAL, FL 33166

ANZOLA, JORGE

DORAL, FL 33166

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

FILED Apr 05, 2006 Secretary of State

Entity Name: IMPROVE INVESTMENT CORP. **Current Principal Place of Business: New Principal Place of Business:** 8249 N.W. 36 STREET SUITE 120 MIAMI, FL 33166 **Current Mailing Address: New Mailing Address:** 8249 N.W. 36 STREET SUITE 120 MIAMI, FL 33166 FEI Number: 13-4309632 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOPEZ, JESUS E 8249 N.W. 36TH STREET SUITE # 120 DORAL, FL 33166 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 Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition EDUARDO, JESUS Name: Name: LOPEZ, JESUS E 8249 NW 36TH STREET # 120 8249 NW 36TH STREET # 120 Address: Address: City-St-Zip: DORAL, FL 33166 City-St-Zip: DORAL, FL 33166 Title: VD Title: () Delete () Change () Addition Name: RUIZ. GISELLY Name: 8249 NW 36TH STREET, SUITE 120 Address: Address: DORAL, FL 33166 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition RAGALADO, MIRNA Name: Name:

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

SIGNATURE: JESUS E LOPEZ PD 04/05/2006

() Change () Addition