2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000114804

Current Principal Place of Rusiness:

Entity Name: THE MARTINEZ FAMILY OF TAMPA CORPORATION

FILED Jul 17, 2006 Secretary of State

ourrent i inicipal i lace of business.	New 1 merbar race of Business.
12509 RAWHIDE DRIVE TAMPA, FL 33626 US	9132 BELL ROCK PLACE LAND 'O LAKES, FL 34638 US
Current Mailing Address:	New Mailing Address:
12509 RAWHIDE DRIVE TAMPA, FL 33626 US	9132 BELL ROCK PLACE LAND 'O LAKES, FL 34638 US
FEI Number: 20-3330117 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:
MARTINEZ, JASON A 12509 RAWHIDE DRIVE TAMPA, FL 33626 US	MARTINEZ, JASON A 9132 BELL ROCK PLACE LAND O'LAKES, FL 34638 US
The above named entity submits this statement for the in the State of Florida.	purpose of changing its registered office or registered agent, or both,
SIGNATURE:	07/17/2006
Electronic Signature of Registered Ac	gent Date
In accordance with s. 607.193(2)(b), F.S., the corporation did r	not receive the prior notice.

OFFICERS AND DIRECTORS:

Election Campaign Financing Trust Fund Contribution ().

TAMPA, FL 33634 US

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

New Principal Place of Rusiness

PRFS Title: () Delete Title: (X) Change () Addition MARTINEZ, JASON A MARTINEZ, JASON A Name: Name: 6802 W COMANCHE AVE Address: 9132 BELL ROCK PLACE Address: City-St-Zip: TAMPA, FL 33634 US City-St-Zip: LAND 'O LAKES, FL 34638 US Title: () Delete Title: (X) Change () Addition MARTINEZ, JONATHAN A MARTINEZ, JONATHAN A Name: Name: Address: 12509 RAWHIDE DRIVE Address: 9129 BELL ROCK PLACE TAMPA, FL 33626 US LAND 'O LAKES, FL 34638 US City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete SEC MARTINEZ, EDITH B Name: MARTINEZ, EDITH B Name: 6802 W COMANCHE AVE Address: 9132 BELL ROCK PLACE Address: City-St-Zip: TAMPA, FL 33634 US City-St-Zip: LAND 'O LAKES, FL 34638 US Title: (X) Delete Title: () Change () Addition MARTINEZ, GÁVIN N Name: Name: Address: 6802 W COMANCHE AVE Address:

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.

City-St-Zip:

SIGNATURE: JASON MARTINEZ PRES 07/17/2006