2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000124194

Entity Name: MINIMALISTA OF NAPLES INC

FILED Jul 17, 2006 Secretary of State

Littly Nai	iie. Wiii vii vii ALi	STA OF NAFLES, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
2400 EAS ⁻ 415	ΓLAS OLAS B	OULEVARD					
	JDERDALE, FI	_ 33301					
Current M	lailing Addres	s:	New Maili	New Mailing Address:			
	ΓLAS OLAS B	OULEVARD					
415 FORT LAL	JDERDALE, FI	_ 33301					
FEI Number: 20-4961328		FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
1500 NOR 200	I, STEPHEN V TH FEDERAL JDERDALE, FI	HIGHWAY					
	named entity s e of Florida.	submits this statement for the	purpose of changing i	its registered	d office or registered agent, or both,		
SIGNATUR	RE:						
	Electror	ic Signature of Registered Ag	jent		Date		
		3(2)(b), F.S., the corporation did r g Trust Fund Contribution ().	ot receive the prior notic	e.			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	FINN, ZACHAR 2400 EAST LAS	Delete Y S OLAS BOULEVARD, SUITE 415 DALE, FL 33301	Title: Name: Address: City-St-Zip:	FINN, ZACH/ 2400 EAST I	(X) Change()Addition ARY LAS OLAS BOULEVARD, SUITE 162 ERDALE, FL 33301		
Title: Name: Address: City-St-Zip:	PANCARO, OS 2400 EAST LAS	Delete VALDO SOLAS BOULEVARD DALE, FL 33301	Title: Name: Address: City-St-Zip:		()Change ()Addition		

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: ZACHARY FINN P,D07/17/2006