2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000125367

Entity Name: EASY ACCESS INVESTMENT CORP.

FILED Apr 04, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1224 SE PORT ST LUCY BLVD PORT ST LUCY, FL 34952 1224 SE PORT SAINT LUCIE BLVD PORT SAINT LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

1224 SE PORT ST. LUCY BLVD 3773 N FEDERAL HWY, SUITE 102 PORT ST. LUCY, FL 34952 POMPANO BEACH, FL 33064

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COSTA, ELANE
COSTA, ELANE

1224 SE PORT ST LUCY BLVD
PORT ST. LUCY, FL 34952 US
1224 SÉ PORT SAINT LUCIE BLVD
PORT SAINT LUCIE, FL 34952 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: ELANE COSTA 04/04/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: COSTA, ELANE Name: COSTA, ELANE
Address: 1224 SE PORT ST LUCY BLVD Address: 1224 SE PORT SAINT LUCIE BLVD

Address: 1224 SE PORT ST LUCY BLVD Address: 1224 SE PORT SAINT LUCIE BLVD City-St-Zip: PORT ST. LUCY, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952

Name: DE SA, MARCUS Name: DESA, MARCUS
Address: 1224 SE PORT ST LUCY BLVD Address: 1224 SE PORT SAINT LUCIE BLVD

City-St-Zip: PORT ST. LUCY, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: S () Delete Title: S (X) Change () Addition

Name: ALVES, DECIO S Name: ALVES, DECIO S

Address: 1224 SE PORT ST LUCY BLVD Address: 1224 SE PORT SAINT LUCIE BLVD City-St-Zip: PORT ST. LUCY, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952

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: ELANE COSTA P 04/04/2006