


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90196 005 \*\*\*158.75

**DOCUMENT # P05000130739**

1. Entity Name  
**MARIA C. MENCHER, PA**



Principal Place of Business      Mailing Address

2500 NE 135 STREET      2500 NE 135 STREET  
 NO. 1204      NO. 1204  
 NORTH MIAMI, FL 33181 US      NORTH MIAMI, FL 33181 US

2. Principal Place of Business      3. Mailing Address

**15165 NW 77th Ave.**      **15165 NW 77th Ave.**

Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**Suite 2011**      **Suite 2011**

City & State      City & State

**Miami Lakes, FL**      **Miami Lakes, FL**

Zip      Country      Zip      Country

**33014**      **USA**      **33014**      **USA**



04292006      Chg-P      CR2E034 (11/05)

4. FEI Number      Applied For

**203520397**      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MENCHER, MARIA C**  
**2500 NE 135 STREET**  
**NO. 1204**  
**NORTH MIAMI, FL 33181**

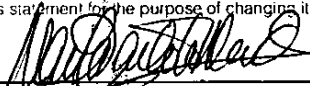
7. Name and Address of New Registered Agent

Name      **MENCHER, Maria C.**

Street Address (P.O. Box Number is Not Acceptable)  
**15165 NW 77th Ave.**  
**Suite 2011**

City      **Miami Lakes**      State      **FL**      Zip Code      **33014**

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:       DATE: **04/28/2006**

Signature, typed or printed name of registrant if not subject to verification. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$350.00**

9. Election Campaign Financing Trust Fund Contribution      \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	MENCHER, MARIA C	2500 NE 135 STREET, NO. 1204	NORTH MIAMI, FL 33181	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
P	MENCHER, Maria C.	15165 NW 77th Ave, Suite 2011	Miami Lakes, FL 33014	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:       **Maria C. Mencher**      DATE: **04/28/2006**      DAYTIME PHONE #: **(954) 297-9774**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #