2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000151352

Entity Name: OPTIMUM RESULTS ENTERPRISES, INC

FILED Jul 19, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

4433 SW 160TH CT 11965 SW 142ND TERRACE MIAMI, FL 33185

UNIT 103

MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

11965 SW 142ND TERRACE 4433 SW 160TH CT

MIAMI, FL 33185 **UNIT 103** MIAMI, FL 33186

FEI Number: 20-3787304 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SANTIAGO, JOSE SANTIAGO, JOSE 4433 SW 160TH CT 11965 SW 142ND TERRACE MIAMI, FL 33185 **UNIT 103**

MIAMI, FL 33186 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: JOSE SANTIAGO 07/19/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

SANTIAGO, JOSE SANTIAGO, JOSE Name: Name: 11965 SW 142ND TERRACE UNIT 103 4433 SW 160TH CT Address: Address:

City-St-Zip: MIAMI, FL 33185 City-St-Zip: MIAMI, FL 33186

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

FAGOT, GREGORY Name: Name: FAGOT, GREGORY

20520 SW 84TH AVE Address: 11965 SW 142ND TERRACE UNIT 103 Address:

MIAMI, FL 33189 MIAMI, FL 33186 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: JOSE SANTIAGO 07/19/2006