

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000153336

FILED
Mar 06, 2006
Secretary of State

Entity Name: MAP COMMERCIAL RESTORATION INC.

Current Principal Place of Business:

5300 NW 55TH BLVD - # 204
COCONUT CREEK, FL 33073

New Principal Place of Business:

6213 NW 45TH AVENUE
COCONUT CREEK, FL 33073

Current Mailing Address:

5300 NW 55TH BLVD - # 204
COCONUT CREEK, FL 33073

New Mailing Address:

6213 NW 45TH AVENUE
COCONUT CREEK, FL 33073

FEI Number: 20-3817311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALMIERI, PETER
5300 NW 55TH BLVD - # 204
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

DUBROW, ALAN
5401 N UNIVERSITY DR
204
CORAL SPRINGS, FL 33067 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: ALAN DUBROW

03/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PALMIERI, PETER
Address: 5300 NW 55TH BLVD - # 204
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPD (X) Delete
Name: PALMIERI, MARITZA
Address: 5300 NW 55TH BLVD - # 204
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PALMIERI, MARITZA
Address: 6312 NW 45TH AVENUE
City-St-Zip: COCONUT CREEK, FL 33073

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: MARITZA PALMIERI

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03/06/2006

Electronic Signature of Signing Officer or Director

Date