2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000161606

Entity Name: NAYANURSES, INC.

MIAMI, FL 33172

City-St-Zip:

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8850 FONTAINEBLEAU BLVD STE 406 MIAMI, FL 33172 **Current Mailing Address: New Mailing Address:** 8850 FONTAINEBLEAU BLVD STE 406 MIAMI, FL 33172 FEI Number: 20-4550519 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NATAMOROS, NAYADES 8850 FONTAINEBLEAU BLVD STE 406 MIAMI, FL 33172 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MATAMOROS, NAYADES Name: Name: 8850 FONTAINEBLEAU BLVD STE 406 Address: Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: Title: DV () Delete Title: () Change () Addition Name: MORALES, OSVALDO Name: 8850 FONTAINEBLEAU BLVD STE 406 Address: Address:

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.

City-St-Zip:

SIGNATURE: OSVALDO MORALES DV 05/01/2006