## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 27, 2006 8:00 am Secretary of State 04-27-2006 90211 025 \*\*\*150.00

City & State  Zip  Country  Zip  Country  Sip  6. Name and Address of Current Registered Agent  7. Iname  FALLAT, BOBBIE  3435 N.W. 17TH AVE. MIAMI, FL 33142  Sireet Address (P.O. to city)  File Now!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  Trust Fund Contribution.  P/D  FALLAT, SEGUNDO  3435 N.W. 17TH AVE. MIAMI, FL 33142  TITLE  P/D  FALLAT, SEGUNDO  3435 N.W. 17TH AVE. MIAMI, FL 33142  TITLE  SIREET ADDRESS CITY 51-2IP  MIMAE  SIREET ADDRESS CITY 51-2IP  MIMAME  SIREET ADDRESS CITY 51-2IP  TITLE  MAME  SIREET ADDRESS CI		04-27-200	6 90211 025 ***	°150.00
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City & State    City & State   City & State				
Zip Country Zip Country 5.  6. Name and Address of Current Registered Agent 7. J.  FALLAT, BOBBIE 3435 N.W. 17TH AVE. MIAMI, FL 33142  1. The above named entity submits this statement for the purpose of changing its registered office or registered agent the obligations of registered agent and take of applicable. (NOTE: Repaised Agent signature required when the obligations of registered agent and take of applicable. (NOTE: Repaised Agent signature required when the obligations of registered agent and take of applicable. (NOTE: Repaised Agent signature required when the obligations of registered agent and take of applicable. (NOTE: Repaised Agent signature required when the obligations of registered agent and take of applicable. (NOTE: Repaised Agent signature required when the obligations of registered agent and take of applicable. (NOTE: Repaised Agent signature required when the obligations of registered agent and take of applicable. (NOTE: Repaised Agent signature required when the obligations of registered agent. (NOTE: Repaised Agent signature required when the obligations of registered agent. (NOTE: Repaised Agent signature required when the obligations of registered agent. (NOTE: Repaised Agent signature required when the obligations of registered agent. (NOTE: Repaised Agent signature required when the obligations of registered agent. (NOTE: Repaised Agent signature agent a	04212006	Chg-P	CR2E034 (11/05	)
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FALLAT, BOBBIE 3435 N.W. 17TH AVE. MIAMI, FL 33142    City	. Name and	Address of New R	egistered Agent	
Street Address (P.O. & MIAMI, FL 33142   **The above named entity submits this statement for the purpose of changing its registered office or registered agent.  **SIGNATURE**  Signature, hyped or printed name of registered agent and tale if applicable.  **PILE NOWILL FEE IS \$150.00  **Added to Trust Fund Contribution.**  **Trust Fund				
\$. The above named entity submits this statement for the purpose of changing its registered office or registered agent the obligations of registered agent.  SIGNATURE    Signature   Sign	). Box Numbe	er is Not Acceptable	<del>)</del>	
THE Obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  10. OFFICERS AND DIRECTORS  11. AD  10. OFFICERS AND DIRECTORS  11. AD  11.			<b>□</b>	ode
THE Obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  10. OFFICERS AND DIRECTORS  11. AD  10. OFFICERS AND DIRECTORS  11. AD  11.	agent ex h	h io the Ctata of Ct	FE	
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in C indicated on this report or supplemental report is true and accurate and that my signature shall have the same of the corporation or the receiver or lystee empowered to execute this reportles required by Chapter 607, Flor changed, or on an attachment with an address, with all ether like empowered.	Chapter 119	, Florida Statutes. I t as if made under	further certify that the oath; that I am an office	information
of the corporation or the receiver or Justee empowered to execute this report as required by Chapter 607, Flor	lorida Statute	s; and that my name	e appears in Block 10	or Block 11 it