

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000072481

FILED
Apr 20, 2006
Secretary of State

Entity Name: PALASAN PROPERTIES, INC.

Current Principal Place of Business:

848 BRICKELL KEY DRIVE
SUITE 4405
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

848 BRICKELL KEY DRIVE
SUITE 4405
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 98-0056042 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARAM, SIMON
848 BRICKELL KEY DRIVE
SUITE 4405
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRANCIS, MARILYN
Address: 7294 NW 1ST MANOR
City-St-Zip: PLANTATION, FL 33317 US

Title: VP () Delete
Name: KARAM, SIMON
Address: 848 BRICKELL KEY DRIVE SUITE 4405
City-St-Zip: MIAMI, FL 33131 US

Title: T,D () Delete
Name: KARAM, ANTOINE
Address: 848 BRICKELL KEY DRIVE SUITE 4405
City-St-Zip: MIAMI, FL 33131 US

Title: S,D () Delete
Name: KARAM, SIMON
Address: 848 BRICKELL KEY DRIVE SUITE 4405
City-St-Zip: MIAMI, FL 33131 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S (X) Change () Addition
Name: KARAM, SIMON
Address: 848 BRICKELL KEY DRIVE SUITE 4405
City-St-Zip: MIAMI, FL 33131 US

Title: VP (X) Change () Addition
Name: KARAM, ANTOINE
Address: 848 BRICKELL KEY DRIVE SUITE 4405
City-St-Zip: MIAMI, FL 33131 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HARVEY, VALERIE
Address: 2100 SOUTH OCEAN LANE SUITE 212
City-St-Zip: FORT LAUDERDALE, FL 33316 US

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: SIMON KARAM

P

04/20/2006

Electronic Signature of Signing Officer or Director

_____ Date