2006 FOR PROFIT CORPORATION

changed, or on an attachment wi

SIGNATURE:

Sep 07, 2006 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # P95000021524 09-07-2006 90012 038 ***150.00 1. Entity Name R.L. MAGRAM, P.A. Principal Place of Business Mailing Address 6697 SW 70 AVE 6697 SW 70 AVE MIAMI, FL 33143 MIAMI, FL 33143 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08292006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 65-0561940 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MAGRAM, RONALD L 6697 SW 70 AVE. Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33143 8. 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. I am familiar with, and accept the obligations of region Aubras Mi Feldur SIGNATURE. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 6, 2006 Added to Fees corporation did not receive the prior notice. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MAGRAM, RONALD L NAME STREET ADDRESS 6697 SW 70 AVE. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33143 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and occurate and that my 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 in Block 10 or Block 11 if

FILED

ATTACHMENT 20054163

Division of Corporations Annual Report/Uniform Business Report Section P.O. Box 6327 Tallahassee, Florida 32314

RE: Annual Report - R.L. Magram, P.A.; Document # P95000021524

To Whom It May Concern:

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Please be advised that we are aware of the fact that the annual report on the above referenced account is being remitted after May 1, 2006. This letter is to inform you that we never received the annual report notice in regards to this document number.

As a result of this and pursuant to section 607.193 of the Florida Statutes, we request a waiver of the \$400 late fee. Enclosed is the annual report for the above referenced company along with a check in the amount of \$150.00.

—Should you have any questions, please feel free to contact me.

I thank you in advance for your courtesy and understanding.

Enclosures

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(Print name and title)

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