

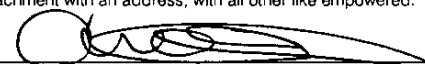


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90078 045 ***150.00

DOCUMENT # P95000024243 1. Entity Name ANASTASIA M. GARCIA, P.A.																																																																																																																											
Principal Place of Business 2100 PONCE DE LEON BLVD SUITE 600 CORAL GABLES, FL 33134 US		Mailing Address 2100 PONCE DE LEON BLVD SUITE 600 CORAL GABLES, FL 33134 US																																																																																																																									
2. Principal Place of Business - No P.O. Box # 770 Ponce De Leon Blvd Suite, Apt. #, etc. Penthouse City & State Coral Gables FL Zip 33134 Country		3. Mailing Address 770 Ponce De Leon Blvd Suite, Apt. #, etc. Penthouse City & State Coral Gables FL Zip 33134 Country																																																																																																																									
4. FEI Number 65-0568880		Applied For <input type="checkbox"/> Not Applicable																																																																																																																									
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																																																																																																									
6. Name and Address of Current Registered Agent GARCIA, ANASTASIA 2100 PONCE DE LEON BLVD SUITE 600 CORAL GABLES, FL 33134		7. Name and Address of New Registered Agent Name ANASTASIA M. GARCIA Str 770 PONCE DE LEON BLVD., PENTHOUSE City CORAL GABLES, FL 33134 City FL Zip Code																																																																																																																									
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 registered agent. SIGNATURE:  11/30/07 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																									
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12. I hereby certify that the information supplied with this filing 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 accurate 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 changed, or on an attachment with an address, with all other like empowered. SIGNATURE:  11/30/07 305-461-5885 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																											