## 2006 FOR PROFIT CORPORATION \* ANNUAL REPORT DOCUMENT # P95000033594 1. Entity Name 440 SOUTH ANDREWS AVENUE, INC. Principal Place of Business Mailing Address

**FILED** Jan 13, 2006 08:00 AM Secretary of State

		440 S. Andrews ave. Ft. Lauderdale, Fl. 33301		į			
	1 <u></u>						
DO NOT WRITE IN THIS SPACE					1 1931 MRGE UN 1970 ERM CRES CHEN 2519 2519 2619 2625 INTO 21110 ETEN 21125 IN 1870		
				01102006	No Chg-P	CR2E034 (11/05)  Applied For	
			Company the second of the second second		1747	Not Applicable	
	e agree e mare e manage e	A CONTRACTOR OF THE CONTRACTOR	*********	5. Certificate	of Status Desired	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent					SS 17 2 - An hold to the Tradeology Story - An hold to the tradeology Stor	Fig. 19	
WALDMAN, ALEIDA ORS 440 S. ANDREWS AVE.				DO NOT WRITE			
FT. LAUDERDALE, FL 33301				- IN THIS SPACE			
			·	<u></u>			
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  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
			<u> </u>			- SATE	
FILE NOWIII FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financia  Trust Fund Contribution.				\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRE	CTORS				· · · · · · · · · · · · · · · · · · ·	
TITLE NAME	P CASTILLO, RICHARD	- -		a an error come from the Address of the	A SAMON STANDS		
STREET ADDRESS	440 S. ANDREWS AVE.				,	A STATE OF THE STA	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301 SD				1 Photographic		
NAME	WALDMAN, ALEIDA ORS S				000000U - ankatun	365510 30023-013 150.00	
STREET ADDRESS CITY-ST-ZIP	440 S. ANDREWS AVE, FT. LAUDERDALE, FL 33301				wee assistant to	index."ntil trafittion"	
TITLE	11.00001				. et a seronan has e hill	year again the anyth Los	
NAME STREET ADDRESS						P	
CITY-SI-ZIP				DO	NOT WI	RITE	
TITLE				IN T	THIS SPA	<b>ACE</b>	
NAME STREET ADDRESS				AR W			
CITY-ST-ZIP						The second secon	
TITLE						Seed on the Seed on the Seed of the Seed o	
NAME STREET ADDRESS					S approximate and a second		
CITY-ST-ZIP						TO THE TANK OF THE PARTY OF THE	
TITLE NAME				•		Section and the section of the secti	
STREET ADDRESS				1	The second second	Prince of the Control	
CITY-ST-7IP		i i			3-dm²		

12. I hereby 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 poor 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 of 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR