2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

STREET ACCRESS C17Y-S7-Z1P

SIGNATURE:

Jan 25, 2006 08:00 AM Secretary of State DOCUMENT # P96000008481 1. Entity Name FERNANDO L. SILVA, O.D., P.A. Principal Place of Business Mailing Address 1313 S.W. 27TH AVENUE 1313 S.W. 27TH AVENUE . MIAMI, FL 33145 MIAMI, FL 33145 01192006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0638276 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent SILVA, FERNANDO L O.D. DO NOT WRITE 1313 S.W. 27TH AVENUE MIAMI, FL 33145 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10 TITLE SILVA, FERNANDO L NAME 1313 S.W. 27TH AVENUE STREET ADDRESS CITY - ST - ZIP MIAMI, FL 33145 TITLE U00000400824 02/02/06-80019-012 150.00 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-St-ZiP TITLE

12. Thereby 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 of 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED