## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000042696

Entity Name: HEURISTIKA, INC.

FILED Jul 22, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

12311 NW 7TH LANE 4543 SW 144 AVE MIAMI, FL 33182 MIAMI, FL 33175

**Current Mailing Address: New Mailing Address:** 

12311 NW 7TH LANE 4543 SW 144 AVE MIAMI, FL 33182 MIAMI, FL 33175

FEI Number: 65-0679959 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOPEZ-MOBILIA, FEDERICO LOPEZ-MOBILIA, FEDERICO 12311 NW 7TH LANE 4543 SW 155 AVE MIAMI, FL 33182 MIAMI, FL 33175 US

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: 07/22/2006

> Electronic Signature of Registered Agent Date

> > Title:

City-St-Zip:

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete LOPEZ-MOBILIA, FEDERICO Name:

12311 NW 7TH LANE Address: City-St-Zip: MIAMI, FL 33182

City-St-Zip:

Title: ( ) Delete LOPEZ-MOBILIA, FEDERICO Name: 12311 NW 7TH LANE Address: MIAMI, FL 33182

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition LOPEZ-MOBILIA, FEDERICO Name:

4543 SW 144 AVE Address: City-St-Zip: MIAMI, FL 33175

Title: (X) Change ( ) Addition

MIAMI, FL 33175

LOPEZ-MOBILIA, FEDERICO Name: Address: 4543 SW 144 AVE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: FLM PD 07/22/2006