2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P96000081462

Entity Name: REMOLINA & ASSOCIATES, INC.

Current Principal Place of Business:

WYNDHAM RESORT-LOWER LEVEL-GUICAN
4833 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

8960 N.W. 8 STREET
SUITE #204
MIAMI, FL 33140

New Mailing Address:

1222 N.E 37 TH PLACE
HOMESTEAD, FL 33033

FEI Number: 65-0704412 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REMOLINA, MAURICIO
WYNDHAM RESORT-LOWER LEVEL-GUICAN
4833 COLLINS AVENUE
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

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: PD ( ) Delete
Name: REMOLINA, MAURICIO
Address: 4833 COLLINS AVE GUICAN LOWER LEVEL
City-St-Zip: MIAMI, FL 33172

Title: VPD ( ) Delete
Name: LOZADA, ERIKA
Address: 8960 NW 8TH ST, STE 214
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: REMOLINA, MAURICIO
Address: 4833 COLLINS AVE GUICAN LOWER LEVEL
City-St-Zip: MIAMI BEACH, FL 33140

Title: VPD (X) Change ( ) Addition
Name: LOZADA, ERIKA
Address: 1222 N.E 37 TH PLACE
City-St-Zip: HOMESTEAD, FL 33033

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MAURICIO REMOLINA PD 05/01/2006

Electronic Signature of Signing Officer or Director — Date