2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# P97000010236

Entity Name: SUSANA HANSEN, P.A.

Current Principal Place of Business:

5300 NW 33 AVE
STE 117
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

5300 NW 33 AVE
STE 117
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 65-0725266 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SERCHAY, ALLAN
5300 NW 33 AVE
STE 117
FORT LAUDERDALE, FL 33309 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: HANSEN, SUSANA
Address: 5300 NW 33 AVE- STE 117
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: T ( ) Delete
Name: SERCHAY, ALLAN
Address: 5300 NW 53 AVE #117
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: HANSEN, SUSANA
Address: 796 GLENRIDGE ROAD
City-St-Zip: KEY BISCAYNE, FL 33149

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: SUSANA HANSEN DP 04/30/2006

Electronic Signature of Signing Officer or Director — Date