


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90158 028 ***150.00

DOCUMENT # P98000008056 1. Entity Name PREP CONNECTION, INC.					
Principal Place of Business 3000 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309			Mailing Address 3000 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		03232006 Chg-P CR2E034 (11/05)	
4. FEI Number 65-0808850				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GORDON, STACY 3000 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
40. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP TASLITZ, STEVEN 3000 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Stephenson, Marc 3000 Cypress Creek Road Ft. Lauderdale, FL 33309
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MORGAMAN, PHILLIP E 3000 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Becker, Doug 100 Fleet Street Baltimore, MD 21202
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO STEINBERG, MARK 3000 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Cohen, Neal 3275 Robinson Bay Road Deephaven MN 55391
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S WIPPMAN, TOM 3000 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby 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 or 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					

40068613

