2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000030165

Entity Name: TEAM FLORIDA BOMBERS INC.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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601 BRICKELL DRIVE 3225 AVIATION AVENUE

SUITE 401 SUITE 301

MIAMI, FL 33131 COCONUT GROVE, FL 33133

Current Mailing Address: New Mailing Address:

601 BRICKELL DRIVE 3225 AVIATION AVENUE

SUITE 401 SUITE 301

COCONUT GROVE, FL 33133

ELDER, DAVID ESQ

ELDER & LEWIS. P.A.

FEI Number: 65-0909882 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:

ELDER, DAVID ESQ ELDER, KRUZMAN & VACCARELLA 601 BRICKELL KEY DRIVE, SUITE 401

MIAMI, FL 33131

601 BRICKELL KEY DRIVE, SUITE 401 3225 AVIATION AVENUE SUITE 301 MIAMI, FL 33131 US COCONUT GROVE, FL 33133 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: DAVID R. ELDER 05/01/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name:ELDER, DAVID R ESQName:ELDER, DAVID R ESQAddress:601 BRICKELL DRIVE, #401Address:3225 AVIATION AVENUE, SUITE 301

City-St-Zip: MIAMI, FL 33131 City-St-Zip: COCONUT GROVE, FL 33133

Title: P () Delete Title: () Change () Addition

 Name:
 FERNANDEZ, EMILIO
 Name:

 Address:
 4529 SW 143 COURT WEST
 Address:

 City-St-Zip:
 MIAMI, FL 33175
 City-St-Zip:

Title: V () Delete Title: () Change () Addition

 Name:
 MARTI, CARLOS
 Name:

 Address:
 16478 S.W. 32 STREET
 Address:

 City-St-Zip:
 MIRAMAR, FL 33027
 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.

5/01/2006
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