2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000043768

Entity Name: LEX & ASSOCIATES, CORP.

FILED Apr 11, 2006 Secretary of State

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

16375 NE 18TH AV 290 NW 165TH STREET

323 P-100

NORTH MIAMI BEACH, FL 33162 MIAMI, FL 33169

Current Mailing Address: New Mailing Address:

16375 NE 18TH AV 290 NW 165TH STREET

323 P-100 NORTH MIAMI BEACH, FL 33162 MIAMI, FL 33169

FEI Number: 65-0900667 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:

BOX, ANTHONY
16375 NE 18TH AV
290 NW 165TH STREET
SUITE 323
P-100

SUITE 323 P-100 N. MIAMI BEACH, FL 33162 US MIAMI, FL 33169 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: ANTHONY D BOX 04/11/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: BOX, ANTHONY D Name: BOX, ANTHONY D

Address: 16375 NE 18TH AV, SUITE 323 Address: 290 NW 165TH STREET, SUITE P100

City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: MIAMI, FL 33169

Title: VP () Delete Title: VP (X) Change () Addition Name: GACHELIN, GUILENE VP (X) Change () Addition Name: GACHELIN, GUILENE

Address: 9721 NW 18TH MANOR Address: 10131 WEST SUNRISE BLVD City-St-Zip: PLANTATION, FL 33322 City-St-Zip: PLANTATION, FL 33322

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: ANTHONY D BOX P 04/11/2006