

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000072919

Entity Name: SHERIDAN 400, INC.

FILED
Feb 21, 2006
Secretary of State

Current Principal Place of Business:

701 NW 62 AVE
STE 110
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

701 NW 62 AVE
STE 110
MIAMI, FL 33126

New Mailing Address:

FEI Number: 65-0973260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, JOSE A
701 NW 62 AVE
STE 110
MIAMI, FL 33126 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: PD () Delete
Name: CACICEDO, RAMON R
Address: 701 NW 62 AVE STE 110
City-St-Zip: MIAMI, FL 33126

Title: V () Delete
Name: GONZALEZ, JOSE A
Address: 701 NW 62 AVE STE 110
City-St-Zip: MIAMI, FL 33126

Title: V () Delete
Name: HERNANDEZ, GUS
Address: 701 NW 62 AVE STE 110
City-St-Zip: MIAMI, FL 33126

Title: S () Delete
Name: CACICEDO, RAMON R JR.
Address: 701 NW 62 AVE STE 110
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VST (X) Change () Addition
Name: GONZALEZ, JOSE A
Address: 701 NW 62 AVE STE 110
City-St-Zip: MIAMI, FL 33126

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

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: RAMON R CACICEDO

PD

02/21/2006

Electronic Signature of Signing Officer or Director

Date