2006 FOR PROFIT CORPORATION **FILED ANNUAL REPORT** Jan 09, 2006 08:00 AN DOCUMENT # P99000075918 **Secretary of State** 1. Entity Name ORESTES R. GARCIA, P.A. Principal Place of Business Maling Address 8900 SW 117TH AVENUE 8900 SW 117TH AVENUE #C205A #C205A MIAMI, FL 33186 MIAMI, FL 33186 01042006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0944151 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARCIA, ORESTES R DO NOT WRITE 8900 SW 117TH AVENUE #C205A IN THIS SPACE MIAMI, FL 33186 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 typester or their name of regions of agent and title Topo cable. FICTE: Fig. ok ed Agen a groupe reg Prid when remaka tajk DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00

OFFICERS AND DIRECTORS

10. **PSTD** TITLE GARCIA, ORESTES R LAME STREET ANDRESS 8900 SW 117TH AVENUE #C205A CITY ST ZIP MIAMI, FL 33186 TITLE NAME STREET ADORESS COTY ST ZIP TITLE LAME STREET ADDRESS CITY ST ZIP NNE LAME STREET ACCRESS CITY ST AIR TITLE 1.AME STREET ADDRESS CITY ST ZIP HAME STREET ADDRESS CITY ST ZIP

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Appried For

Not Applicable

DO NOT WRITE IN THIS SPACE

12.	Thereby certify that the information supplied with this filling 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 it 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 it
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SIGNATURE:

TYPED OR PRINTED HAME OF SIGNING OFFICER ON DIRECTOR

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