## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000101367

City-St-Zip:

BOCA RATON, FL 33431

Entity Name: CORPORATE EXECUTIVE SUITES MIZNER INC.

FILED Feb 15, 2006 Secretary of State

Thirty Name: Cold Clottle Excooling College Mizher, Into.						
Current Principal Place of Business:				New Principal Place of Business:		
1900 CORPORATE BLVD. SUITE 400E BOCA RATON, FL 33431				225 NE MIZNER BLVD. SUITE 300 BOCA RATON, FL 33432		
Current Mailing Address:				New Mailing Address:		
SUITE 400	PORATE BLVI E ON, FL 3343					
FEI Number: 65-3968719 FEI Number Applied For ( ) FEI Number			FEI Numi	ber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
NETBURN, DAVID A 6800 W COMMERCIAL BLVD # 5 FORT LAUDERDALE, FL 33319 US				BLOOM, JONATHAN 2295 NW CORPORATE BLVD. SUITE 117 BOCA RATON, FL 33431 US		
The above in the State		submits this statement for the	e purpose of	changing its registered	d office or registered agent, or both,	
SIGNATURE: YORAM GALEL				02/15/2006		
Electronic Signature of Registered Agent					Date	
Election Can	npaign Financing	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	GALEL, HENRI	Delete ATE BLVD. SUITE 400E FL 33431	l ,	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ZIMET, DAVE	Delete ATE BLVD. SUITE 400E FL 33431	1	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	GALEL, YORAN	) Delete /I ATE BLVD. SUITE 400E	I	Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: YORAM GALEL D 02/15/2006