2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000057029

City-St-Zip: MIAMI, FL 33131

FILED Jan 17, 2006 Secretary of State

Entity Name: REIBCO-MIAMI CORPORATION					
Current Pr	incipal Place	of Business:	New Principal Place of	New Principal Place of Business:	
	H POINTE DR CH, FL 33139				
Current Ma	ailing Addres	s:	New Mailing Address	New Mailing Address:	
300 SOUTH POINTE DRIVE #2601 MIAMI BEACH, FL 33139			300 SOUTH POINTE D	C/O PETER CATALANO 300 SOUTH POINTE DRIVE #2601 MIAMI BEACH, FL 33139	
FEI Number:	90-0156364	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
REICHENBERGER, JEFFREY E ESQ. 799 BRICKELL PLAZA, SUITE 700 MIAMI, FL 33131 US			799 BRICKELL PLÁZA	REICHENBACHER, JEFFREY E ESQ. 799 BRICKELL PLAZA, SUITE 700 MIAMI, FL 33131 US	
The above in the State		submits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE: JEFFERY E. REICHENBACHER				01/17/2006	
	Electron	ic Signature of Registered Ager	nt	Date	
Election Cam	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CATALANO, PE	INTE DRIVE #2601	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CATALANO, DA	INTE DRIVE #2601	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	REICHENBACH	Delete IER, JEFFREY E PLAZA-SLITE 700	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: PETER CATALANO 01/17/2006 MR.