

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Aug 24, 2006  
Secretary of State**

DOCUMENT# P04000006526

Entity Name: A PROPERTY RECOVERY & ASSISTANCE BROKERS, INC.

**Current Principal Place of Business:**

18520 NW 67TH AVE. #108  
MIAMI, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

18520 NW 67TH AVE. #108  
MIAMI, FL 33015

**New Mailing Address:**

FEI Number: 61-1468415      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRINER, ANDRE  
18520 NW 67TH AVE. #108  
MIAMI, FL 33015 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

**OFFICERS AND DIRECTORS:**

Title: D            ( ) Delete  
Name: GRINER, ANDRE  
Address: 18520 NW 67TH AVE. #108  
City-St-Zip: MIAMI, FL 33015

Title: D            ( ) Delete  
Name: GRINER, GEORGIA  
Address: 18520 NW 67TH AVE. #108  
City-St-Zip: MIAMI, FL 33015

Title: D            (X) Delete  
Name: COPPINS, MURKEL  
Address: 6015 NW SEVENTH AVE.  
City-St-Zip: MIAMI, FL 33128

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: GEORGIA GRINER

SECT

08/24/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date