

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000050888

**FILED**  
**Feb 19, 2006**  
**Secretary of State**

**Entity Name:** R2 TECHNOLOGY SERVICES, INC.

**Current Principal Place of Business:**

9155 S. DADELAND BLVD., STE 1400  
MIAMI, FL 33156

**New Principal Place of Business:**

9155 S. DADELAND BLVD.  
SUITE 1400  
MIAMI, FL 33156

**Current Mailing Address:**

9155 S. DADELAND BLVD., STE 1400  
MIAMI, FL 33156

**New Mailing Address:**

9155 S. DADELAND BLVD.  
SUITE 1400  
MIAMI, FL 33156

**FEI Number:** 27-0010970

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ( )

**Certificate of Status Desired** ( )

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

SILVA, ANTHONY X  
9155 S. DADELAND BLVD., STE 1400  
MIAMI, FL 33156 US

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

SILVA, ANTHONY X  
9155 S. DADELAND BLVD.  
SUITE 1400  
MIAMI, FL 33156 US

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

02/19/2006

Date

**Election Campaign Financing Trust Fund Contribution** ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SILVA, ANTHONY X  
Address: 13507 SW 59 AVENUE  
City-St-Zip: MIAMI, FL 33156

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

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: ANTHONY X. SILVA

PD

02/19/2006

Electronic Signature of Signing Officer or Director

Date