


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 08:00 AM
Secretary of State

DOCUMENT # G55379
 1. Entity Name
BOCA CORPORATE CENTRE, INC.



Principal Place of Business Mailing Address
7777 GLADES ROAD, STE 310 **7777 GLADES ROAD, STE 310**
BOCA RATON, FL 33434 US **BOCA RATON, FL 33434 US**



01122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2320272 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DEUTCH, JEFFREY A.
7777 GLADES ROAD
SUITE 300
BOCA RATON, FL 33434

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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 _____ DATE _____
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

1103000519009
 05/02/06-80034-025 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DEUTCH, JEFFREY A 7777 GLADES ROAD #300 BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WIENER, ELLIOTT M. 7777 GLADES ROAD #410 BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO SCHMIER, ROBERT J. 7777 GLADES ROAD, STE 310 BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FEURRING, DOUGLAS R. 7777 GLADES ROAD, STE 310 BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Robert J. Schmier 4-13-06 (561) 483-8400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Robert J. Schmier, Pres.