## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000029136

SEIDEL, MONTE K

5418 SKLYINE BLVD

CAPE CORAL, FL 33914 US

Name:

Address:

City-St-Zip:

Entity Name: A BIG DEAL REAL ESTATE SERVICES, INC.

FILED Feb 27, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	LINE BLVD. RAL, FL 33914	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	LINE BLVD. RAL, FL 33914	US			
FEI Number	: 51-0537396	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:	
	MONTE K LINE BLVD. RAL, FL 33914	US			
	e named entity so e of Florida.	ubmits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () I SEIDEL, MONTE 5418 SKYLINE E CAPE CORAL, F	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () I SEIDEL, SHARL 5418 SKYLINE E CAPE CORAL, F	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () I SEIDEL, SHARL 5418 SKYLINE E CAPE CORAL, F	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D ()I	Delete	Title:	( ) 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MONTE SEIDEL PRES 02/27/2006