

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # L87393

1. Entity Name

WEST PALM BEACH DONUTS, INC.



Principal Place of Business

1301 ROYAL PALM BEACH BLVD
ROYAL PALM BEACH, FL 33411 US

Mailing Address

1301 ROYAL PALM BEACH BLVD.
ROYAL PALM BEACH, FL 33411 US



01112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

05-0455624

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MANUEL, ANDRADE S
53 ST THOMAS DR.

PALM BEACH GARDENS, FL 33418

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

1100000390979
01/24/06-80020-025 158.75

10. OFFICERS AND DIRECTORS

TITLE P
NAME ANDRADE, MANUEL S.
STREET ADDRESS 53 ST. THOMAS DRIVE
CITY-ST-ZIP PALM BEACH GARDENS, FL

TITLE V
NAME RUBIANO, STEVEN C
STREET ADDRESS 108 VILLA BELLA
CITY-ST-ZIP JUPITER, FL 334582728

TITLE S
NAME RUBIANO, SUSAN A
STREET ADDRESS 108 VILLA BELLA
CITY-ST-ZIP JUPITER, FL 334582728

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEVEN RUBIANO 1/12/06

Date

Daytime Phone #

561-795-9900