

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006 08:00 AM
Secretary of State

DOCUMENT # 120295
 1. Entity Name
UNGAR-MARSHALL COMPANY



1702



04242006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-0805662 Applied For Not Applicable

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

DO NOT WRITE IN THIS SPACE

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Principal Place of Business
**523 MICHIGAN AVE
 MIAMI BEACH, FL 33139**

Mailing Address
**523 MICHIGAN AVE
 MIAMI BEACH, FL 33139**

6. Name and Address of Current Registered Agent
**FRYD, JONATHAN
 523 MICHIGAN AVE
 MIAMI BEACH, FL 33139**

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]* (NOTE: Registered Agent signature required when reinstating) DATE: 4/24/06

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COHRAS, MICHAEL 1111 LINCOLN RD MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FRYD, JONATHAN 523 MICHIGAN AVE MIAMI BEACH, FL 33139
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 05/06/06-80089-020 150.00

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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]* **JONATHAN FRYD** DATE: 4/24/06 DAYTIME PHONE #: (305) 673-2948