


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2006 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # 369600 1. Entity Name 26401 CORP. |  |
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| Principal Place of Business 2775 W OKEECHOBEE ROAD HIALEAH, FL 33010 | Mailing Address 2775 W OKEECHOBEE ROAD HIALEAH, FL 33010 |
|--|--|



01062006 No Chg-P CR2ED34 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|---|---------------------------------------|
| 4. FEI Number 59-1301329 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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|---|
| 6. Name and Address of Current Registered Agent GINSBURG, MURRAY 2775 W OKEECHOBEE RD HIALEAH, FL 33010 |
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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

1100000382186
01/11/06 30000 007 150.00

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD GINSBURG, MURRAY 2775 W. OKEECHOBEE RD. HIALEAH, FL 33010 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SDT GINSBURG, ANDREW 2775 W. OKEECHOBEE RD. HIALEAH, FL 33010 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DAVIS, RANDY 2775 W. OKEECHOBEE RD. HIALEAH, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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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

1/9/06

Date

305 887-6570

Daytime Phone #