## 2006 FOR PROFIT CORPORATION

## Apr 24, 2006 08:00 AN Secretary of State **ANNUAL REPORT DOCUMENT #417214** 1. Entity Name DOLPHIN BUILDING CORPORATION Principal Place of Business Mailing Address 1111 S OCEAN BLVD, #120 1111 SO,OCEAN BLVD. BOCA RATON, FL 33-4327 US #120 US BOCA RATON, FL 33432 CR2E034 (11/05) 04192006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPECIALE, FRANK DO NOT WRITE 1111 S. OCEAN BLVD, #120 BOCA RATON, FL 33432 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. Frank Speciale, President (NOTE Registered Agent signature required when reinstating) of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10, OFFICERS AND DIRECTORS TITLE NAME SPECIALE, FRANK U000000526714 1111 S. OCEAN BL. #120 STREET ADDRESS 05/04/06-80084-017 150.00 CITY-ST-ZIP BOCA RATON, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP

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 eath; 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

SIGNATURE:

TITLE NAMÉ STREET ADDRESS CITY-ST-ZIP

Frank Speciale, President 561-368-8480

**FILED**