2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 20, 2006 08:00 AN Secretary of State

954 926 1900

Daytime Phone #

DOCU 1. Entity Nan JODEE, I		ا نا نو سائه سان در			Secr	etary of State
Principal Place of Business Mailing Address 3100 N 29TH AVE 3100 N, 29TH AVE. HOLLYWOOD, FL 33020 US HOLLYWOOD, FL 33020 US			S	 	11114 - 1 1111 1 2114 1411 1 1111	NYAN ATAN WHAN ATAN ATANGKAN NI ITAN
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				1 STATIS WINES STREET	o Chg-P C	R2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
	STEVEN 190 ST. #2411 RA, FL 33180	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 reinstailing] DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				.00 May Be ed to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P ALTMAN, STEVEN 3370 NE 190ST. #2411 AVENTURA, FL 33180 V GREENBERG, JODEE 3370 NE 190ST. #2411	CTORS .		<i>;</i> ;;	######################################	1776 948-024 150.60
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	AVENTURA, FL 33180	· · · · · · · · · · · · · · · · · · ·			OT WR IS SPA	
CATY-ST-ZIP TITLE NAME STREET ADDRESS CATY-ST-ZIP TITLE						
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby condicated of the co	certify that the information supplied with this f on this report or supplemental report is true poration or the receiver or trustee empowere or on an attachment with an address, with a	d to execute this report as requir	emptions contained ure shall have the red by Chapter 607	in Chapter 119, Flori same legal effect as if . Florida Statutes; and	da Statutes. I furth made under oath; I that my name app	er certily that the information that I am an officer or director years in Block 10 or Block 11 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: