## 2006 FOR PROFIT CORPORATION . ANNUAL REPORT

## Feb 01, 2006 08:00 AM **Secretary of State DOCUMENT # 605388** 1. Entity Name BONAVISTA HOLDINGS, INC. Principal Place of Business Mailing Address 120 SOUTH UNIVERSITY DR 120 SOUTH UNIVERSITY DRIVE SUITE B SUITE B PLANTATION, FL 33324 PLANTATION, FL 33324 01242006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1868796 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FEINSTEIN, MARVIN, ESQ. DO NOT WRITE 120 SOUTH UNIVERSITY DRIVE SUITE B IN THIS SPACE PLANTATION, FL 33324 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 hyper or printed name of registered agent and late if applicable (NOTE Registered Agent signature required when reinstating) DATE 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. $\Box$ Added to Fees OFFICERS AND DIRECTORS 10. VPD TITLE FEINSTEIN, BARRY NAME STREET ADDRESS 1384 GREENE AVENUE SUITE 300 - U00000413589 02/11/06-80001-004 150.00 CUTY-ST-ZIP MONTREAL, QUEBEC CANADA, H3Z 2B1 THEE FEINSTEIN, MARVIN 120 SOUTH UNIVERSITY DR. SUITE B STREET ADDRESS City-ST-ZIP PLANTATION, FL 33324 NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE DITLE NAME STREET AUDRESS CITY-ST-ZIP MARKE STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS City-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 flustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 in changed, or on an attactificent with this address with all other like empowered.

SIGNATURE:

FILED