


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 06, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 609294</b> 1. Entity Name TREASURE CAY SERVICES, INC.	
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Principal Place of Business 2301 SOUTH FEDERAL HIGHWAY FORT LAUDERDALE, FL 33316	Mailing Address 2301 SOUTH FEDERAL HIGHWAY FORT LAUDERDALE, FL 33316
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**DO NOT WRITE IN THIS SPACE**



03032006 No Chg-P CRZE034 (11/05)

4. FEI Number 59-1954518	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  MICHA, JANE 2301 S. FEDERAL HWY FT. LAUDERDALE, FL 33316
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**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PO MEISTER, ROBERT L 2301 SO FEDERAL HWY FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VSTD MICHA, JANE 2301 SO FEDERAL HWY FT LAUDERDALE, FL
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03/16/06-80060-003 150.00

**DO NOT WRITE  
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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 807, 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: 	3/2/06 954- 525-7711
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>