

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001750

Entity Name: JOAN GROBER, INC.

FILED  
Jan 26, 2006  
Secretary of State

## Current Principal Place of Business:

3170 SOUTH OCEAN BLVD  
603 N  
PALM BEACH, FL 33480 PB

## New Principal Place of Business:

## Current Mailing Address:

3170 SOUTH OCEAN BLVD  
603 N  
PALM BEACH, FL 33480 PB

## New Mailing Address:

FEI Number: 06-1188321

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JAMES R. WELLS, P.A.  
50 S. E. FOURTH AVE.  
DELRAY BEACH, FL 33483 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTC D ( ) Delete  
Name: GROBER, JOAN  
Address: 3170 SOUTH OCEAN BLVD.  
City-St-Zip: PALM BEACH, FL 33480

Title: VSD ( ) Delete  
Name: GROBER, AL  
Address: 3170 SOUTH OCEAN BLVD.  
City-St-Zip: PALM BEACH, FL 33480

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOAN GROBER

PTCD

01/26/2006

Electronic Signature of Signing Officer or Director

Date