## 2006 FOR PROFIT CORPORATION

## Jul 14, 2006 08:00 AN **ANNUAL REPORT Secretary of State** DOCUMENT # F99000004808 ROBÉRT FRIEDMAN ASSOCIATES, LTD., INC. Principal Place of Business Mailing Address **500 SE MIZNER BLVD 500 SE MIZNER BLVD** 703A ---BLDG. # I 703A-BLDG. # 1 BOCA RATON, FL 33432 BOCA RATON, FL 33432 CR2E034 (11/05) 07102006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-3132069 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FRIEDMAN, CAROL S DO NOT WRITE 500 SE MIZNER BLVD #703A--BLDG # 1 IN THIS SPACE BOCA RATON, FL 33432 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 reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 6, 2006 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS DILE PS FRIEDMAN, CAROL S NAME STREET ADDRESS 500 SE MIZNER BLVD BLDG# 1 CITY-ST-ZIP BOCA RATON, FL 33432 TITLE 000000570243 NAME 07/14/06-80005-022 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 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, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAM

FILED