

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2006 08:00 AM
Secretary of State

DOCUMENT # G03485

1. Entity Name

BOROFF ENTERPRISES, INC.



Principal Place of Business

**1620 TANGERINE ST
2
MELBOURNE FL 32901
US**

Mailing Address

**275 BAY TREE LANE
PALM BAY FL 32909**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

59-2227922

Applied For
Not Applied

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BOROFF, GUY E
275 BAYTREE LANE
PALM BAY FL 32909**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May i
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **BOROFF, GUY E**
STREET ADDRESS **275 BAY TREE LANE**
CITY- ST- ZIP **PALM BAY FL**

TITLE **VP** ☐ Delete
NAME **BOROFF, DORIS M**
STREET ADDRESS **275 BAY TREE LANE**
CITY- ST- ZIP **PALM BAY FL**

TITLE **S** ☐ Delete
NAME **BOROFF, RYAN S**
STREET ADDRESS **3097 ROWE ST NE**
CITY- ST- ZIP **PALM BAY FL 32905**

TITLE **D** ☐ Delete
NAME **FISHER, JOHN M**
STREET ADDRESS **PO BOX 120455**
CITY- ST- ZIP **MELBOURNE FL 32912**

TITLE **D** ☐ Delete
NAME **SCURTO, ROBERT J**
STREET ADDRESS **1735 LAS PALMOS DR SW**
CITY- ST- ZIP **PALM BAY FL 32909**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Add
NAME **U000000427393**
STREET ADDRESS **02/21/06-80006-004 150.00**
CITY- ST- ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY- ST- ZIP

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TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: **S CO 11**

GUY E BOROFF

2/7/06

321-725-9821