2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006
Secretary of State

DOCUMENT# H53758

Entity Name: POSNER & SONS, INC.

Current Principal Place of Business:

18851 NE 29TH AVE 7TH FL
SUITE 700
MIAMI, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

18851 NE 29TH AVE 7TH FL
700
MIAMI, FL 33180 US

New Mailing Address:

FEI Number: 59-2527947 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POSNER, GARY D.
18851 NE 29TH AVE 7TH FL
SUITE 700
AVENTURA, FL 33180 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: DP ( ) Delete
Name: POSNER, GARY D.,
Address: 21205 NE 37TH AVE #906
City-St-Zip: AVENTURA, FL 33180

Title: DVP ( ) Delete
Name: POSNER, EILEEN,
Address: 21205 NE 37TH AVE #906
City-St-Zip: AVENTURA, FL 33180

Title: DS ( ) Delete
Name: POSNER, MATT
Address: 2710 TREASURE COVE CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: DT ( ) Delete
Name: POSNER, RON
Address: 1049 BOCA COVE LANE
City-St-Zip: HIGHLAND BEACH, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: GARY D. POSNER PRES 03/29/2006

Electronic Signature of Signing Officer or Director Date