

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 21, 2005  
Secretary of State**

DOCUMENT# J14455

Entity Name: CNBR STORES, INC.

**Current Principal Place of Business:**

5250 TOWN CTR. CIR.  
SUITE 131  
BOCA RATON, FL 334861067

**New Principal Place of Business:**

**Current Mailing Address:**

5250 TOWN CTR. CIR.  
SUITE 131  
BOCA RATON, FL 334861067

**New Mailing Address:**

FEI Number: 59-2701125      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SOLOMON, ALLAN B.  
7777 GLADES RD., STE. 300  
SUITE 131  
BOCA RATON, FL 33434 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: S ( ) Delete  
Name: SOLOMON, ALLAN B.,  
Address: 7777 GLADES RD.  
City-St-Zip: BOCA RATON, FL

Title: D ( ) Delete  
Name: NIDDAN, MAX,  
Address: 5250 TOWN CNTR CIR 131  
City-St-Zip: BOCA RATON, FL

Title: DP ( ) Delete  
Name: NIDDAM, ALINE,  
Address: 5250 TOWN CENTER CIR. STE 131  
City-St-Zip: BOCA RATON, FL

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALINE NIDDAM

DP

03/21/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date