

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90042 002 ***158.75

DOCUMENT # J37067

1. Entity Name

ACCESSORIA INC.



Principal Place of Business

1210 S. DIXIE HIGHWAY
CORAL GABLES FL 33146

Mailing Address

1210 S. DIXIE HIGHWAY
CORAL GABLES FL 33146



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/05)

Zip

Country

Zip

Country

4. FEI Number

59-2736868

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BODNER, EDWARD A.
1210 S. DIXIE HIGHWAY
CORAL GABLES FL 33146

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 reappointing)

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 Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME BODNER, EDWARD A.
STREET ADDRESS 1210 S. DIXIE HIGHWAY
CITY-ST-ZIP CORAL GABLES FL

TITLE DV ☐ Delete
NAME BODNER, EMMY
STREET ADDRESS 1210 S. DIXIE HIGHWAY
CITY-ST-ZIP MIAMI FL 33146

TITLE S ☒ Delete
NAME FARFAN, RONALD
STREET ADDRESS 1210 SOUTH DIXIE HIGHWAY
CITY-ST-ZIP CORAL GABLES FL

TITLE T ☐ Delete
NAME BROWN, BRIANNA
STREET ADDRESS 1210 S DIXIE HWY
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☒ Change ☐ Addition
NAME EDWARD A. BODNAR JR.
STREET ADDRESS 1210 S. DIXIE HWY
CITY-ST-ZIP CORAL GABLES FL. 33146

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
OK NO CHANGE

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

TITLE ☐ Change ☐ Addition
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:

Edward A. Bodnar EDWARD A. BODNAR JAN 30/06 (305) 661-4414

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #