

2006 FOR PROFIT CORPORATION ANNUAL REPORT

01-09-2006 90029 033 ***158.75
J41107

FILED

06 JAN 12 PM 2:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J41107					
1. Entity Name COLON BUILDING, INC.					
Principal Place of Business 25 SE 2ND AVE., STE. 750 MIAMI, FL 33131			Mailing Address 25 SE 2ND AVE., STE. 750 MIAMI, FL 33131		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2742134	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KAPUSTIN, RAFAEL 25 S.E. SECOND AVENUE SUITE 750 MIAMI, FL 33131				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 _____ (NOTE: Registered Agent signature required when remaining)					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	KAPUSTIN, RAFAEL		NAME		
STREET ADDRESS	25 SE SECOND AVE SUITE 750		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	KAPUSTIN, SARA		NAME	Secretary + Director	
STREET ADDRESS	25 SE SECOND AVE SUITE 750		STREET ADDRESS	Kapustin, SARA	
CITY-ST-ZIP	MIAMI, FL		CITY-ST-ZIP	25 SE Second Ave Suite 750	
				MIAMI, FL	
TITLE	VP	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	KAPUSTIN, ANDREW J		NAME		
STREET ADDRESS	25 SE SECOND AVE SUITE 750		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL		CITY-ST-ZIP		
TITLE	VP	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	KAPUSTIN, GINA E		NAME		
STREET ADDRESS	25 SE SECOND AVE SUITE 750		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing 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: _____			1/5/06 3053719090		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		