


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # J48086 1. Entity Name B B & D OF COCOA BEACH, INC.	
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Principal Place of Business P O BOX 372337 SATELLITE BCH, FL 32937	Mailing Address P O BOX 372337 SATELLITE BCH, FL 32937
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03312006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2749413	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BANAPOOR, SHAHROOZ 600 1ST AVE SATELLITE BEACH, FL 32937
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**DO NOT WRITE
IN THIS SPACE**

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**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**U00000523321
05/03/06-80067-014 150.00**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOBSON, ROGER 5500 N ATLANTIC AV COCOA BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BJERNING, EUGENE 5500 N ATLANTIC AV COCOA BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BANAPOOR, SHAHRAM 3755 TRANQUILITY DR MELBOURNE, FL 32934
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BANAPOOR, SHAHROOZ 3860 TURTLE MOUND RD MELBOURNE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Shahrooz Banapoor **SHAHROOZ BANAPOOR** 4/1/06 321-777-7528 X14
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #