


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 21, 2006 8:00 am**  
**Secretary of State**


02-27-2006 90068 022 \*\*\*150.00

<b>DOCUMENT # K17980</b> 1. Entity Name EAST HILLSBOROUGH PROPERTIES, INC.	
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Principal Place of Business 4204 B N MACDILL AVE TAMPA, FL 33607 US	Mailing Address 4204 B N MACDILL AVE TAMPA, FL 33607 US
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**DO NOT WRITE IN THIS SPACE**

66006277



01262006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2878833	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PICKERING, MICHAEL J MD  
4204 B NORTH MACDILL AVE  
TAMPA, FL 33607

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PICKERING, MICHAEL J 4204B N. MACDILL AVENUE SUITE 1 TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASTILLO, ORLANDO J 4204 B NORTH MACDILL AVE., SUITE 1 TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/06  
Date Daytime Phone #



ATTACHMENT

66006277

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 2, 2006

EAST HILLSBOROUGH PROPERTIES, INC.  
4204 B N MACDILL AVE  
TAMPA, FL 33607 US

Subject: EAST HILLSBOROUGH PROPERTIES, INC.

Reference Number: K17980

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/CJ

ANNUAL REPORTS SECTION