2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 05, 2006 08:00 AM Secretary of State

MAR 3 0 2006

Daytime Phone #

	ANIOABI		,	7	Secretary of State
DOCUMENT # L10173 1. Entity Name 421 WASHINGTON AVENUE, INC.					
Principal Plac 230-5TH STI	REET	ailing Address 230-5TH STREET	1		
MIAMI BEACI	H, FL 33139	MAMI BEACH, FL 33139			HAN BEIGENRIN SEEEL NN STEN BEEN BURN BIGN BURN BURN AN HAR
DO NOT WRITE IN THIS SPACE				03152006 No Chg-P CR2E034 (11/05) 4. FEI Number	
	6. Name and Address of Current Regis	stered Agent	1	L	
ROBINS, S 230-5TH S MIAMI, FL	SCOTT STREET				NOT WRITE HIS SPACE
	tions of registered agent.		· -	<u>.</u>	a, in the State of Florida. I am familiar with, and accept
	Signature, typed or printed name of registered agent and dife	if applicable (NOTE, Registere	ed Agent signature required	d when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Final Trust Fund Contribution.		.00 May Be led to Fees	
10.	OFFICERS AND DIRE	CTORS }	-{		
TITLE NAME	PD ROBINS, SCOTT		1		
STREET ADDRESS	T -		1		
City-SI-ZIP	MIAMI BEACH, FL 33139		1		U00000492531
NAME STREET ADDRESS CHY-SI-ZIP					04/19/06-80065-024 150.0
TITLE NAME			1		
STREET ADDRESS				חח	NOT WRITE
CITY-ST-ZIP			1		
TITLE				IN T	THIS SPACE
STREET ADDRESS					
CSTY-ST-ZIP			1		
TITLE			1		
NAME STREET ADDRESS			1		
CITY-ST-ZIP			1		
TITLE			1		
NAME ETERNI ADDOCES	`		1		
STREET ADDRESS CITY-ST-ZIP					
	certify that the information supplied with this	filing does not qualify for the ex	emptions contained	d in Chapter 119	Florida Statutes, I further certify that the Information
indicated of the co	d on this report or suppl amental report is true reporation or the receiver or trustee empowers	and accurate and that my signs d to execute this report as requ	sture shall have the ired by Chapter 60	same legal effect 7, Florida Statutes	Florida Statutes. I further certily that the information as if made under oath; that I am an officer or director; and that my name appears in Block 10 or Block 11 II
cuangeo	ь, от он ан виаспитети with <u>ан астотов</u> , with a	п отгад тка атгроматец.			

SCOTT PORT NOT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _