

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M82705

1. Entity Name
ROBERTA'S PLACE, INC.



FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90372 017 ***150.00

Principal Place of Business
% ROBERTA PERKINS *Sid Perkins*
4972 N. PINE ISLAND RD.
LAUDERHILL, FL 33351

Mailing Address
% ROBERTA PERKINS *elo Sid Perkins*
4972 N. PINE ISLAND RD.
LAUDERHILL, FL 33351



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01042006 Chg-P CR2E034 (11/05)

4. FEI Number
65-0053982

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GREENBERG, VICTOR
3591 INVERRARY DR
#203
LAUDERHILL, FL 33319

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 _____
Signature typed or printed name of registered agent in title 1 and 2, and 6. (NOTE: Registered Agent Signature required when re-listing) 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 P	<input checked="" type="checkbox"/> Delete	TITLE President, Sec., Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GREENBERG, VICTOR		NAME Sid Perkins	
STREET ADDRESS 3591 INVERRARY DR		STREET ADDRESS 9560 Weldon Circle, J-111	
CITY-STATE-ZIP LAUDERHILL, FL 33351		CITY-STATE-ZIP TAMARAC, FL 33321	
TITLE ST	<input checked="" type="checkbox"/> Delete	TITLE Vice-President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PERKINS, SID		NAME Victor Greenberg	
STREET ADDRESS 9560 WELDON CIR., J-111		STREET ADDRESS 3591 Inverrary Dr #206	
CITY-STATE-ZIP TAMARAC, FL 33321		CITY-STATE-ZIP LAUDERHILL, FL 33351	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-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: *Sidney Perkins* - **Sidney Perkins - Pres** 1/18/06 954-749-2612

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #