


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # N42249 1. Entity Name FEDERATION HOLDINGS, INC.	
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Principal Place of Business 5890 S PINE ISLAND ROAD DAVIE, FL 33328	Mailing Address 5890 S PINE ISLAND ROAD DAVIE, FL 33328
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02202006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0245073	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

WEINBAUM, MARTIN
5890 S PINE ISLAND ROAD
DAVIE, FL 33328

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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 reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**


9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANTOR, DANIEL D 8411 LAGOS DE CAMPO TAMARAC, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FINKELSTEIN, RICHARD 2520 LAGUNA TERRACE FORT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISBERG, GAIL 4100 GALT OCEAN DR FORT LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACOBS, BERNARD 5010 NOB HILL ROAD SUNRISE, FL 33351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEINBAUM, MARTIN P 12330 NW 77TH MANOR PARKLAND, FL 33078
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, RICKY 5010 NOB HILL ROAD SUNRISE, FL 33351

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02/08/06-80073-002 61.25

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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 617, 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:  Martin P. Weinbaum 2/20/06 954-252-6900

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