## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 19, 2006 8:00 am Secretary of State

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Mailing Address   Mailing Address   Also ITEXANILA RD   All STATES   Also ITEXANILA RD   All STATES   All S	1. Entity Name RICHARD RUBINSTEIN, P.A.						07-07-	-2006 90	)001 03	7 ***550	
Suite, April, et sec.	1490 TUSKANILA RD. 212 MORTON LANE			2708		e i preien in oth	1 1111 1114 N		4 e a ve (1712 181)		
Sutes, Apri. 4, etc.    Sutes, Apri. 4, etc.	2. Principal Pla	ace of Business	3. Mailing Address   151 Northucky Blue Cir-								
Sp.   Country   Zin   32712   Country   Sp. 3226606   Sp. 3276606   Sp. 3276606   Sp. 32760606   Sp. 32760606   Sp. 32760606   Sp. 327606060   Sp. 327606060   Sp. 327606060   Sp. 327606060   Sp. 327606060   Sp. 32760606060   Sp. 327606060600   Sp. 32760606060   Sp. 327606060600   Sp. 327606060600   Sp. 3276060600   Sp. 3276060600   Sp. 3276060600   Sp. 3276060600   Sp. 32760600   Sp. 327606000   Sp. 32760600   Sp. 327606000   Sp. 32760600   Sp. 327606000   Sp. 32760600   Sp. 32760600   Sp. 32760600   Sp. 32760600	Suite, Apt. (	etc.				06302006	Chg-P	CR2E03	4 (11/05)		
RUBINSTEIN, RICHARD 212 MORTON LANE WINTER SPRINGS, FL 32708  Street Add page (FO. Bar Nymber a Not Address of New Registered Agent WINTER SPRINGS, FL 32708  Cny Hoppide FL Zo Cagan The above numed entity submits this dissemble for the purpose of changing its registered office or registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with, and accept the address of registered agent, or both, in the State of Ponds, it am lamifar with an address of registered agent, or both, in the State of Ponds, it am lamifar with a state of registered agent, or both, in the State of Ponds, it am lamifar with a state of registered agent, or both, in the State of Ponds in th	City & State		City A State PK4	MPOPKY FOR			06				
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RUBINSTEIN, RICHARD 212 MORTON LANE WINTER SPRINGS, FL 32708  Steet Addyses (P.O. Ban Number a Not Acceptable) Cuc D  City Applies  City Appli		5. Name and Address of Current	Registered Agent		Name	7. Name and Ad	dress of New R	egistered Ap	gent		
Sired Address of Page 17 - 2 Ber Namber a Not Acceptable Code  City Applica Tell State of Portion Code  City Applica Tell State of Portion Code  City Applica Tell State of Portion Code  The above named entity submits this afterweek for the purpose of changing as registered agent, or both, in the State of Portion. In the obligations of registered agent, or both, in the State of Portion. In the obligations of registered agent.  SIGNATURE  FILE NOWIN FEE 18 \$550.00  Due by September 6, 2006  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TILL ORDINATED, PICHARD MARK SIRRI ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TILL ORDINATED, PICHARD MARK SIRRI ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TILL ORDINATED, PICHARD MARK SIRRI ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TILL ORDINATED, PICHARD MARK SIRRI ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TILL ORDINATED, PICHARD MARK SIRRI ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TILL ORDINATED, PICHARD MARK SIRRI ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TILL ORDINATED MARK SIRRI ADDITIONS CONT. 51-29  TILL MARK SIRRI ADDITIONS CONT. 51-29  TILL MARK SIRRI ADDITIONS CITY-51-29  TILL MARK SIRRI ADDITIONS CITY	RUBINSTEIN RICHARD										
8. The above named entity submits this glosement for the purpose of changing its registered office or registered agent, or both, in the State of Ronda. I am familiar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am familiar with, and accept the obligations of registered agent, or both, in the State of Ronda. I am familiar with, and accept the familiar of the purpose of changing its registered diffice or registered agent, or both, in the State of Ronda. I am familiar with, and accept the familiar of the purpose of changing its registered diffice or registered agent, or both, in the State of Ronda. I am familiar with, and accept the familiar of the purpose of changing its registered agent, or both, in the State of Ronda.    Interest continued   Date   Port	212 MORTON LANE				Street Address	(P.O. Box Number is VE/14uck(	Not Acceptable	"Circle			
Total poles  SIGNATURE  FILE NOWN FEE 15 \$550.00  Due by September 6, 2006  Trust Fund Commission.  POTE Registered Agent dignature required when remaining.  FILE NOWN FEE 15 \$550.00  Due by September 6, 2006  Trust Fund Commission.  10.  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TILE  D RUBINSTEIN, RICHARD  STRET ADDRESS  STRET ADDRESS  STRET ADDRESS  STRET ADDRESS  STRET ADDRESS  STRET ADDRESS  GTT-51-29  TILE  NAME  STRET ADDRESS  GTT-51-29  TILE  TIL		,			City	Apopka	<del>-</del> :	FL	Zip Copt	 לודל	
SIGNATURE    Description or private information application   POTE, Registered Apert alignature required after memoratery)   DATE											
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MAME STREET ADDRESS CITY-57-2IP  ITILE NAME STREET ADDRESS CITY-57-2IP  ITILE NAME STREET ADDRESS CITY-57-2IP  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:	<u> </u>			+-							
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SIGNATURE: 7/14/06 (407)678-8-387	12. I hereby c	ertify that the information supplied with	this filing does not qualify for	the exi	emptions containe	of in Chapter 119, Fi	orida Statutes. H	further certify	y that the in	formation or director	
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SIGNATURE:    SIGNATURE AND TYPED OR PRINTED PARKE OF BIORING OFFICER OR DIRECTOR   Date   Dayling Places 4	l		1/1/19			<del>-</del> -/	iu lac	(4m)	1678-8	C45	
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