2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P0000 1. Entity Name SHARON R. CANTIN, P.A.	0098151	
Principal Place of Business 4346 BROOKER CREEK DR PALM HARBOR, FL 34685	Mailing Address 4346 BROOKER CREEK OR PALM HARBOR, FL 34685	

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04282006 No Chg-P	CR2	E034 (11/05)
4. FEI Number		Applied For
59-3670082	_	Not Applicat
5. Certificate of Status Desired	S8.75 Additional Fee Required	
DO NOT W		_

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CANTIN, SHARON R
4346 BROOKER CREEK DR
PALM HARBOR, FL 34685

DO NOT WRITE
IN THIS SPACE

	named entity submits this statement for the ρ ions of registered agent.	surpose of changing its registered affic	ce or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title in	applicable. (NOTE: Registered Agent s	ngrature required when reinstelling}	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution,	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS		<u> </u>	
title Name Street address City-St-Zip	D CANTIN, SHARON R 4346 BROOKER CREEK DR PALM HARBOR, FL 34685	 		U00000544459 05/11/06-80037-012 150.03	
TITLE NAME STREET ALVUMSS CITY-ST-ZIP				130, 11, 00, 20031, 015, 120,00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME STRCET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby o	ertify that the information supplied with this fil	ing does not qualify for the exemption	ns contained in Chapter 119	P. 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, 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 enpowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cantin 4-28

Овумпа Ріхана #