2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000106885

Entity Name

B.R.A.D.'S SPORTSCARDS COLLECTIBLES INC.



FILED Jul 17, 2006 08:00 AM Secretary of State

Principal Place of Business

10548 WILES ROAD CORAL SPRINGS, FL 33076 Mailing Address

10548 WILES ROAD CORAL SPRINGS, FL 33076



DO NOT WRITE IN THIS SPACE

07122006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1056553 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRODY, RICH 12205 NW 71 ST. PARKLAND, FL 33076

DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the ions of registered agent. Signature, typed or printed name of registered agent and the		_		egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept . U00000571038 . U00000571038
	LE NOW!!! FEE IS \$150.00 ue by September 6, 2006	Election Campaign Financ Trust Fund Contribution.		~ —	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIR P BRODY, RICH 12205 NW 71ST PARKLAND, FL 33076 VP BRODY, DENISE 12205 NW 71 ST. PARKLAND, FL 33076	ECTORS		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			· :			
TITLE NAME STREET ADDRESS						

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:

TITLE
NAME
STREET ADDRESS

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

7/12/0

954-255-2109

Daytime Phone #