2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P00000111294 1. Enlity Name						Secretary of State				
FLEUR, IN	IC.		· -					<i>J</i>		
Principal Place	e of Business		Mailing Address		1					
10 DAKIN AVE MOUNT KISCO NY 10549			PO BOX 732 MOUNT KISCO NY 10549							
2. Principal Place of Business			3. Mailing Address			3131	1991 (5) 98 <i>(5)</i> 985(1 881() 8	######################################	(SESE MESE IEII)	I BIRIDAL H IAAL
Suite, Apt. II, etc.			Suite, Apt. #, etc.			ts	MOORE	CR2E034	(10/05)	
City & State			City & State			4. FEI Numb	er 06-16058	86		Applied For Not Applicable
Zip	Country		Zip Cour		atry	5. Certificate of Status Desired		additional ired		
	6. Name and Ad	dress of Current f	egistered Agent		Name	7. Name and	Address of Nev	v Registered	Agent	
SANDBERG, NEAL L ESQ					Street Address (P.O. Box Number is Not Acceptable)					
2650	ON, SCHINDEF D BISCAYNE B	R& SANDBER LVD	RG, P.A.		ONECE MODICION (er is trut Accepte			
MIAMI FL 33137										
					City		<u></u> _	FL	Zip Ci	
8. The above the obligati	named entity submit lans of registered ago	is thas statement for ent.	the purpose of changing its	register	ed office or register	red agent, or bo	in, in the State of	Florida. I am	familiar wi	th, and accept
SIGNATURE.	Signature, typed or printed r	tame of registered agent a	nd title if applicable (NCT	E: Registare	d Agent signatura रागागणक	swhen (existalism)		DATE		<u></u>
F	ILE NOW!!! FEE		1.24 to 1			,				
After	May 1, 2006 Fee Payable to Florid	Will Be \$550,00	State				9. Election Car Trust Fund C	npaign Financ Contribution.	ing Si	5.00 May Be ided to Fees
10.		OFFICERS AND I		tt.		ADDITIONS	CHANGES TO C	FFICERS AND	DIRECTO	DRS IN 11
TITLE NAME	D CIRKVA SCHUMA	CHER. BARBARA	☐ Defete	TITE NAM	_		03/10/06-	451007	Chang Start	e 🗌 Addilion - oc
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CITY-ST-ZIP					-S1-ZIP					
TITLE			☐ Defete	τιτυ					☐ Chang	e 🔲 Addition
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CITY-ST-ZIP				CITY	-ST-ZIP		···			 -
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NAME			C Descrit	NAM					C) ound	e (
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS '-ST-ZIP					
12. I hereby of indicated of the cor	certify that the inform on this report or sup poration or the recei d, or on an attachine	nation supplied with plemental report is yet or treatee emp ent with an address	I this filing does not qualify true and accurate and that owered to execute this repo- s, with all other like empowe	for the earny signa	xemptions contains ture shall have the uired by Chapter 60	ed in Section 11 same legal effer 07, Florida Statu	9. Florida Statute ct as if made und ites; and that my	s. I further celler oath, that I name appears	tify that the am an office in Block to PC NO.	e information cer or director 10 or Block 11
SIGNATURE: Day Confer like empowered. BARCARA CILEVA SCHUMACHE!										