

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000112350

1. Entity Name  
COPPER MANAGEMENT, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 MAY -1 AM 9:21

Principal Place of Business  
2665 S. BAYSHORE DRIVE  
SUITE 703  
MIAMI, FL 33133

Mailing Address  
2665 S. BAYSHORE DRIVE  
SUITE 703  
MIAMI, FL 33133

**DO NOT WRITE IN THIS SPACE**



03082006 No Chg-P CR2E034 (11/05)

4. FEI Number  
65-1101914

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

WORLD CORPORATE SERVICES, INC.  
2665 S BAYSHORE DR, STE 703  
MIAMI, FL 33133

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME PS  
RICHARDS, TIMOTHY D  
STREET ADDRESS  
CITY-ST-ZIP 2665 S. BAYSHORE DRIVE, SUITE 703  
MIAMI, FL 33133

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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 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: Timothy B. Richards  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/06 (305) 858-9900

Date Daytime Phone #