FILED 2 of 2
Jan 27, 2006 08:00 AM
Secretary of State

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000028411

1. Entity Name
FRANCESCA OF PALM BEACH, INC.

Principal Place of Business
11381 PROSPERITY FARMS ROAD
PALM BEACH GARDENS, FL 33410

Mailing Address
1828 ARDLEY ROAD
JUNO ISLES, FL 33408

DO NOT WRITE IN THIS SPACE

01242006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1090971 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

MARTIN, STEPPANI T
MARTIN & MARTIN TAX & ACCTING, INC
1704 17TH LANE
LAKE WORTH, FL 33463

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 changing) 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

000000403607
02/06/06-80013-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	PVSD
NAME	ROMANO, FRANCESCA
STREET ADDRESS	1828 ARDLEY ROAD
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	T
NAME	ROMANO, PAT
STREET ADDRESS	1828 ARDLEY ROAD
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Francesca Romano Pat Romano 1-25-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
FRANCESCA ROMANO, PRESIDENT