## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000030695

Title:

Name:

Address:

City-St-Zip:

FILED Jun 30, 2006 Secretary of State

Entity Na	me: STEINE	R SPA RESORTS (CONNE	CTICUT), INC.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
770 SOUT CORAL G.	TH DIXIE HIGI ABLES, FL 3	HWAY, 2ND FLOOR 3146				
Current Mailing Address:			New Maili	New Mailing Address:		
770 SOUT CORAL G	TH DIXIE HIGI ABLES, FL 3	HWAY, 2ND FLOOR 3146				
FEI Number	: 65-1093665	FEI Number Applied For()	FEI Number Not App	Dicable ( ) Certificate of Status Desired ( )		
Name and	d Address of	Current Registered Agent	: Name and	d Address of New Registered Agent:		
770 SOUT SUITE 200 CORAL G	) ABLES, FL 3	HWAY, 2ND FLOOR 3146 US				
	e named entity e of Florida.	submits this statement for t	the purpose of changing i	its registered office or registered agent, or both,		
SIGNATUI						
	Electro	onic Signature of Registered	Agent	Date		
		l93(2)(b), F.S., the corporation d ng Trust Fund Contribution (  ).	id not receive the prior notic	ce.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	FLUXMAN, LE	DIXIE HWY S #200	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	FUSFIELD, G 770 SOUTH D	) Delete EENN DIXIE HWY STE. 200 LES, FL 33146	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	BOEHM, ROE 770 S. DIXIE	) Delete BERT C HWY SUITE 200 LES, FL 33146	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	LAZARIS, ST	DIXIE HWY S #200	Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition LAZARUS, STEPHEN 770 SOUTH DIXIE HWY S #200 MIAMI, FL 33146		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LEONARD I FLUXMAN DP 06/30/2006

( ) Delete

770 SOUTH DIXIE HWY S #200

LAZAR, ROBERT

MIAMI, FL 33146

() Change () Addition