

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90120 040 ***150.00

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1. Entity Name
MULHOLLAND DEVELOPMENT CORPORATION



Principal Place of Business

**10550 BISCAYNE BLVD
MIAMI, FL 33138**

Mailing Address

**10550 BISCAYNE BLVD
MIAMI, FL 33138**

00014000



DO NOT WRITE IN THIS SPACE

04102006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1107560

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**MULHOLLAND, JAMES D
10550 BISCAYNE BLVD
MIAMI, FL 33138**

**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 renewing)

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	PO
NAME	MULHOLLAND, ISABEL R
STREET ADDRESS	10550 BISCAYNE BLVD
CITY-ST-ZIP	MIAMI, FL 33138
TITLE	VSTD
NAME	MULHOLLAND, JAMES D
STREET ADDRESS	10550 BISCAYNE BLVD
CITY-ST-ZIP	MIAMI, FL 33138
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: JAMES D.
MULHOLLAND**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/06

Date

205-891-5889

Daytime Phone #