

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P01000061561

1. Entity Name
BREVARD HOME MART OF NORTH MERRITT ISLAND, INC.



Principal Place of Business
779 E MERRITT ISLAND CSWY
PMB 753
MERRITT ISLAND, FL 32952

Mailing Address
779 E MERRITT ISLAND CSWY
PMB 753
MERRITT ISLAND, FL 32952

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5022006

Chg-P

CR2E034 (11/05)

4. FEI Number
59-3726205

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VILLANUEVA-HAFIZI, JERRI A
779 E MERRITT ISLAND CSWY
PMB 753
MERRITT ISLAND, FL 32952

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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]

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

5/2/2006

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME VILLANUEVA-HAFIZI, JERRI A
STREET ADDRESS 779 E MERRITT ISLAND CSWY PMB 753
CITY-ST-ZIP MERRITT ISLAND, FL 32952

TITLE VP ☐ Delete
NAME HAFIZI, HAMID
STREET ADDRESS 779 E MERRITT ISLAND CSWY PMB 753
CITY-ST-ZIP MERRITT ISLAND, FL 32952

TITLE VP ☐ Delete
NAME HAFIZI, DAVID
STREET ADDRESS 779 E MERRITT ISLAND CSWY PMB 753
CITY-ST-ZIP MERRITT ISLAND, FL 32952

TITLE VP ☐ Delete
NAME HAFIZI, MARYAM
STREET ADDRESS 779 E MERRITT ISLAND CSWY PMB 753
CITY-ST-ZIP MERRITT ISLAND, FL 32952

TITLE D ☐ Delete
NAME SANDONATO, FRANK F.
STREET ADDRESS 779 E MERRITT ISLAND CSWY
CITY-ST-ZIP PMB 753 MERRITT ISLAND, FL 32952

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Change ☒ Addition
NAME SANDONATO, FRANK F.
STREET ADDRESS 779 E MERRITT ISLAND CSWY
CITY-ST-ZIP PMB 753 MERRITT ISLAND, FL 32952

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 400076018304
CITY-ST-ZIP 06/08/06--01039--023 **70.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/06

(321) 452-8143

Date

Daytime Phone #

FILED
06 MAY -4 AM 10:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

