


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P01000091897</b> 1. Entity Name E G B CORP.	
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Principal Place of Business 24940 S. TAMiami TRAIL, STE. 103 BONITA SPRINGS, FL 34134	Mailing Address 24940 S. TAMiami TRAIL, STE. 103 BONITA SPRINGS, FL 34134
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04282006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-1143242	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
DAVID MCEL RATH P.A. 3838 TAMiami TRAIL NORTH, #410 NAPLES, FL 34103	

**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	D	
NAME	BAJRAKTAREVIC, ENVER	
STREET ADDRESS	24950 TAMiami TRAIL, #103	
CITY - ST - ZIP	BONITA SPRINGS, FL 34134	
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
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05/13/06-80108-022 150.00

**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: ENVER BAJRAKTAREVIC** *Enver Bajraktarevic* **4-28-06** **239-992-4232**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #