2006 FOR PROFIT CORPORATION ANNUAL REPORT				FILED Apr 24, 2006 08:00 AN Secretary of State		
. D	O NOT WRITE I	N THIS SPA	CE			034 (11/05) Applied For Not Applicable
	6. Name and Address of Current Reg	··· · · · · · · · · · · · · · · · · ·	···· · · · · · · · · · · · · · · · · ·	5. Certificate of Sta	atus Desired	\$8.75 Additional Fee Required
BASCH, M 4100 N 29 HOLLYW(MICHAEL	alereu Ayem			OT WRITI	
the obligat	e named entity submits this statement for the tions of registered agent. Sgnature typed or printed name of registered agent and to .E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00		ered Ageni signsturë required		the Stâte of Florica. 1 am DATE	familiar with, and accept
10. TITLE	OFFICERS AND DIRE			· · · · · · · · · · · · · · · · · · ·		
NAME STREET ADORESS OTY-SI-ZIP	BASCH, MICHAEL 4100 N 29 AVE HOLLYWOOD, FL 33020			····· ···· ····	U00000529/ 35/05/06-900	
HILE NAME STREET ADDRESS COLY-SE-ZIP				· · · · · ·	· · · · · · · · · · · · · · · · · · ·	Constants
NTL+ NAME STREE ADDRESS CHTY-ST-71P	-					
HTLE NAME SIREET ADDRESS GTY-ST-ZIP					IIS SPACI	
T-TLE NAME STREET ADDRESS CITY-ST-7IP				· · · · · · · · · · · · · · · · · · ·	1999 - 1999 -	
INTEE NAME STREET ADDRESS GITY-ST-ZIP						· · · · · · · · · · · · · · · · · · ·
cnangeo	certify that the information supplied with this d on this report or supplemental report is true uporation or the receiver or trustee empower t, or on an attachment with an address, with	filing does not qualify for the e and accurate and that my sign ed to execute this report as req all other like empowered	exemptions containe nature shall have the pured by Chapter 60	d in Chapter 119, Flo same logal effect as i 7, Florida Statutes, an	Ida Statutes. I further ce I made under oath, that I d that my name appears	rijiy that the information am an officer or citrector in Block 10 or Block 11 if
SIGNAT	SIGNATURE AND TYPED OR PRINT	ED NAME OF SIGNING OFFICER OR DIRE			Date	Daytime Plione #