

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P01000116460

1. Entity Name
HOLDING CORP.



Principal Place of Business

10420 SW 77TH AVE
MIAMI, FL 33176

Mailing Address

PO BOX 160392
MIAMI, FL 33116

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90347 047 ***150.00



04122006 No Chg-P CR2E034 (11/05)

4. FEI Number
22-3950897

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MCCAFFREY, JAMES E
10420 SW 77TH AVE
MIAMI, FL 33156

**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 SD
NAME MCCAFFREY, JAMES E
STREET ADDRESS PO BOX 160392
CITY-ST-ZIP MIAMI, FL 33116

TITLE PVT
NAME MCCAFFREY, JAMES E
STREET ADDRESS PO BOX 160392
CITY-ST-ZIP MIAMI, FL 33116

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 E. McCaffrey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES E. MCCAFFREY

4/12/06

305-271-1990

Date

Daytime Phone #