#### **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

# **FILED** Jul 19, 2006 8:00 am Secretary of State 07-19-2006 90006 014 \*\*\*150.00

DOCUMENT # P0200005480  1. Entity Name WHO SAYS ? INC.					40400	.004		
Principal Place of Business 4080 BRIARCLIFF CIRCLE BOCA RATON, FL 33496  Mailing Address 4080 BRIARCLIFF CIRCLE BOCA RATON, FL 33496  BOCA RATON, FL 33496					40100	1087		
2. Principal Place of Business 3. Mailing Address								
Suite, Apt. #, etc.				07132006	07132006 Chg-P CR2E034 (11/05)			
City & State City & State				4. FEI Num 13-39	ber 76326		plied For t Applicable	
Zip			Country	<del></del>				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name				
NEWMAN, MORTON 6880 LISMORE AVENUE BOYNTON BEACH, FL 33437				Street Address (P.O. Box Number is Not Acceptable)				
			City	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, typed or printed name of registered agent and title	e if applicable. (NOTE: Reg	Sistilized Agent signature i	required when reinstating)	T	DATE		
FILE NOW!!! FEE IS \$150.00  Due by September 6, 2006  9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees		with s. 607.193(2)(b), not receive the prior r		
10.			11.		S/CHANGES TO OFF	ICERS AND DIRECTORS	IN 11	
TITLE NAME STREET ADDRESS	PD CAMHI, ROY 4080 N.W. 60TH CIRCLE	☐ Delete	NAME STREET ADDRESS	DD CAMHI ROY 6678 AW 4	12 H WAY 12 FL 334	Change	☐ Addition	
CITY-ST-ZIP	BOCA RATON, FL 33496			BOCA- KATO	NFL 334			
TITLE NAME STREET ADDRESS	STD NEWMAN, MORTON 6880 LISMORE AVENUE	□ Delete	NAME STREET ADORESS			☐ Change	☐ Addition	
CITY-ST-ZIP	BOYNTON BEACH, FL 33437		CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CHY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY+ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
12. I hereby indicated of the collaboration	certify that the information supplied with this on this report or supplemental report is two poration or the receiver or trustee empower , or on an attackment with an address, with	filing does not qualify for the and accurate and that my s ed to execute this report as r all other like empowered.	e exemptions con ignature shall hav equired by Chapt	ntained in Chapter 1 ve the same legal eff ter 607, Florida Statu	19, Florida Statutes, I ect as if made under ites; and that my nam	further certify that the in oath; that I am an officer e appears in Block 10 or	nformation or director Block 11 if	

## ATTACHMENT

Page 1 of 2

ADDRESS ATTACKED



#### 4010008 **Division of Corporations**

### 2006 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the appropriate button at the bottom to generate the annual report form.

> This information cannot be changed on the report. P02000005480 Document Number WHO-SAYS ?INC. Business Entity Name Original File Date 11/05/1997

> > FEI Number

13-3976326

Principal Address

4080 BRARCLIFF CIRCLE

BOCARATON, FL 33496

Mailing Address

4080 BRIARCLIFF CIRCLE

BOÇA RATON, FL 33496

Registered Agent

**MORTON NEWMAN** 6880 LISMORE AVENUE

BOYNTON BEACH, FL 33437 US

Officer/Director Name And Address

PD **ROY CAMHI** 4080 N.W. 60TH CIRCLE

BOCARATON, FL 33496

STD

**MORTON NEWMAN** 6880 LISMORE AVENUE **BOYNTON BEACH, FL 33437** 

After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.