


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 22, 2006 8:00 am**  
**Secretary of State**

03-22-2006 90018 030 \*\*\*150.00

<b>DOCUMENT # P02000011468</b> 1. Entity Name <b>LINDA COREY STUDIO &amp; DESIGN, INC.</b>					
Principal Place of Business <b>3506 BANYAN CIRCLE COCONUT GROVE, FL 33133</b>			Mailing Address <b>3506 BANYAN CIRCLE COCONUT GROVE, FL 33133</b>		
2. Principal Place of Business <b>3505 Main Lodge Drive</b> Suite, Apt. #, etc.		3. Mailing Address <b>3505 Main Lodge Drive</b> Suite, Apt. #, etc.			
City & State <b>Coconut Grove, FL</b> Zip <b>33133</b>		City & State <b>Coconut Grove, FL</b> Zip <b>33133</b>		4. FEI Number <b>02-0543614</b> Applied For: <input type="checkbox"/> Not Applicable	
Country <b>USA</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>COREY, LINDA 3506 BANYAN CIRCLE COCONUT GROVE, FL 33133</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>3505 Main Lodge Drive</b> City <b>Coconut Grove</b> <b>FL</b> Zip Code <b>33133</b>		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and use if applicable (NOTE: Registered Agent signature required when reappointing)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D COREY, LINDA 3506 BANYAN CIRCLE COCONUT GROVE, FL 33133</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>3505 Main Lodge Drive Coconut Grove, FL 33133</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <i>Linda Corey</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>3/20/06</b> Daytime Phone # <b>305 441 8599</b>		