## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P03000065506**

1. Entity Name
XBP MARKETING CORP.



Principal Place of Business

3015 N. OCEAN BOULEVARD

NO. 121

FORT LAUDERDALE, FL 33308

Mailing Address

3015 N. OCEAN BOULEVARD

NO. 121

DO NOT WRITE IN THIS SPACE

FORT LAUDERDALE, FL 33308



FILED

06 MAY 11 P. 3: 3E

SECRE FALLAMASTIC PUSADA



04272006

No Chg-P

CR2E034 (11/05)

4. FEI Number 56-2368109

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FOSTER, REBECCA A 3015 N OCEAN BLVD. STE. 121 FORT LAUDERDALE, FL 33308

## DO NOT WRITE IN THIS SPACE

, 51.1 E 105E/15/12 55550					
the obligat	tions of registered agent.	ourpose of changing its registere	d office or	egistered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered	Agent signatur	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finance     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	<u></u>		
TITLE	DPS				
NAME	FOSTER, REBECCA A				
STREET ADDRESS	3015 N. OCEAN BLVD. #121			1771 1771 1771 1771	") """ , "" , "" , "" , "" , "" , "" ,
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308			2001	076202159 -01036004 **\$495.00
TITLE	DVT			00/14/05	-01035004 **5495.00
AME	LANDAU, MARC J				
TREET ADDRESS	3015 N. OCEAN BLVD. #121				
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308				
ITLE	DV	•			
IAME	HIERHOLZER, LARRY				
STREET ADDRESS	3015 N. OCEAN BLVD. #121				T WRITE
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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 exposurered 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: \_

CITY-ST-ZIP

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rebecco A Foster 4/07/06 954.568.0444