

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000129498

1. Entity Name
BG'S MANAGEMENT, INC.



Principal Place of Business
4300 N UNIVERSITY DR STE D-106
LAUDERDALE, FL 33351

Mailing Address
4300 N UNIVERSITY DR STE D-106
LAUDERDALE, FL 33351



01112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0382037

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GREENBERG, JOEL F
4300 N UNIVERSITY DR STE D-106
LAUDERDALE, FL 33351

**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 *Joel F. Greenberg*
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 D
NAME GREENBERG, BURTON D
STREET ADDRESS 4300 N UNIVERSITY DR STE D-106
CITY-ST-ZIP LAUDERDALE, FL 33351

TITLE D
NAME GREENBERG, SUZANNE
STREET ADDRESS 4300 N UNIVERSITY DR STE D-106
CITY-ST-ZIP LAUDERDALE, FL 33351

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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UN0000390426
01/23/06-80026-011 150.00

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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: *Suzanne Greenberg*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #