



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 09, 2007 08:00 AM**  
**Secretary of State**

|   |   |
|---|---|
| <b>DOCUMENT # P04000038472</b><br>1. Entity Name<br>ANITA K. REBHAN, B.C.B.A., INC. |  |
|---|---|

|   |   |
|---|---|
| Principal Place of Business<br>2715 SOUTHWEST 8TH STREET<br>BOYNTON BEACH, FL 33435 | Mailing Address<br>2715 SOUTHWEST 8TH STREET<br>BOYNTON BEACH, FL 33435 |
|---|---|

**DO NOT WRITE IN THIS SPACE**

  
01032007 No Chg-P CR2E034 (11/05)  
4. FEI Number  
04-3786291  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
Applied For  
Not Applicable

6. Name and Address of Current Registered Agent  
SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)  
U00000579424  
01/10/07-80004-016 150.00  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**  
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PSTD<br>REBHAN, ANITA K<br>2715 SOUTHWEST 8TH STREET<br>BOYNTON BEACH, FL 33435 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
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| TITLE<br>NAME<br>STREET ADDRESS<br>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:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
01/03/2007  
Date  
Daytime Phone #