

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040488

Entity Name: DOWNTOWN 418, INC.

FILED  
Mar 16, 2006  
Secretary of State

## Current Principal Place of Business:

C/O ZVI RAFILOVICH, CPA  
5313 MCKINLEY STREET  
HOLLYWOOD, FL 33021

## Current Mailing Address:

C/O ZVI RAFILOVICH, CPA  
5313 MCKINLEY STREET  
HOLLYWOOD, FL 33021

## New Principal Place of Business:

C/O ZVI RAFILOVICH, CPA  
2229 SHERIDAN STREET  
HOLLYWOOD, FL 33020

## New Mailing Address:

C/O ZVI RAFILOVICH, CPA  
2229 SHERIDAN STREET  
HOLLYWOOD, FL 33020

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZVI RAFILOVICH, CPA, P.A.  
2229 SHERIDAN STREET  
HOLLYWOOD, FL 33020    US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title:                      D                      ( ) Delete  
Name:                      POSIN, MONICA  
Address:                      C/O 2229 SHERIDAN STREET  
City-St-Zip:                      HOLLYWOOD, FL 33020

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ZVI RAFILOVICH

POA

03/16/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date