2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 27, 2006 08:00 AN Secretary of State

1. Entity Nam	MENT # P0400005198 iew gardens bed & break			Sec	cretary of State	
1608 LAKE /	incipel Place of Business Mailing Address 608 LAKE AVE. 1608 LAKE AVE. EST PALM BEACH, FL 33401 WEST PALM BEACH, FL 3340		1			
DO NOT WRITE IN THIS SPA			CE	01192006 No Chg-P CR2E034 (11/05) 4. FEI Number 20-1495787 Applied For Not Applicable 5. Certificate of Status Desired □ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent EMMERICH, PETER A. 1608 LAKE AVENUE WEST PALM BEACH, FL 33401			DO NOT WRITE IN THIS SPACE			
8. The above named entity submits this statement for the purpose of changing its registere the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Printed Note: Registered Agent and title if applicable FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.				tered agent, or bo fred when renstating) 5.00 May Be dded to Fees		DATE 0402694 -80017-024 150.00
10. NITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRI P EMMERICH, PETER A 1608 LAKE AVE. WEST PALM BEACH, FL 33401 V ROSE, HENRICH L 1608 LAKE AVE. WEST PALM BEACH, FL 33401 ST WEIMAR, JAN R 1608 LAKE AVE. WEST PALM BEACH, FL 33401	ECTORS			NOT W	
12. I hereby certify that the information supplied with this filling 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR