


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000052573 1. Entity Name FRANDY OF KEY WEST, INC.	
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Principal Place of Business 381 WEST INDIES DRIVE RAMROD KEY, FL 33042	Mailing Address 381 WEST INDIES DRIVE RAMROD KEY, FL 33042
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04272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 55-0861830	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GELMAN, ANDREW J 381 WEST INDIES DRIVE RAMROD KEY, FL 33042	DO NOT WRITE IN THIS SPACE
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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: Andrew Gelman (NOTE: Registered Agent signature required when reinstating) DATE: 4-27-06

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GELMAN, ANDREW J 381 WEST INDIES DRIVE RAMROD KEY, FL 33042
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GELMAN, FRANCINE S 381 WEST INDIES DRIVE RAMROD KEY, FL 33042
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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 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: Andrew Gelman Andrew Gelman 4-27-06 305-296-8269
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #