

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 22, 2006 8:00 am**  
**Secretary of State**

02-22-2006 90013 028 \*\*\*150.00

DOCUMENT # P04000107938

1. Entity Name

ANNE JEANNE PROPERTIES INC.



Principal Place of Business

1395 BRICKELL AVE STE 650  
MIAMI FL 33131

Mailing Address

1395 BRICKELL AVE STE 650  
MIAMI FL 33131



2. Principal Place of Business

1395 Brickell Avenue

Suite, Apt. #, etc.

650

3. Mailing Address

1395 Brickell Avenue

Suite, Apt. #, etc.

650

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33131

Country

U.S.A.

Zip

33131

Country

U.S.A.

1st MOORE

CR2E034 (10/05)

4. FEI Number

20-1758346

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

THE STEWART LAW FIRM  
1395 BRICKELL AVE STE 650  
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

The Stewart Law Firm

Street Address (P.O. Box Number is Not Acceptable)

1395 Brickell Avenue

Suite 650

City

Miami

FL

Zip Code  
33131

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

*Robert W. Stewart, Pres*

1-31-06

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME FRANCISCO MACHADO DA CRUZ  
STREET ADDRESS 35 AVENUE DE MONTCHOISI  
CITY-ST-ZIP LAUSANNE SW

TITLE D ☐ Delete  
NAME FRASSAINT, ANNE JEANNE  
STREET ADDRESS 35 AVENUE DE MONTCHOISI  
CITY-ST-ZIP LAUSANNE SW

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Anne J Frassaint* ANNE J FRASSAINT Feb. 7<sup>th</sup> 2006 41-21-311-5587

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #