2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000125808

Entity Name
 JOAN LINO REAL ESTATE, P.A.



FILED Feb 15, 2006 08:00 AM Secretary of State

Principal Place of Business

704 CADIZ ROAD VENICE, FL 34285 US Mailing Address

704 CADIZ ROAD VENICE, FL 34285

US



01272006

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1573697

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

	6.	Name and Address of Current Registered Agent	
-			

ADDISON, MICHAEL C 400 N. TAMPA ST. SUITE 1100 TAMPA, FL 33602

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IAMPA, FI	L 33002				
	named entity submits this statement for the plants of registered agent.	lurpose of changing its registered	office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and acce
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered A	gent signature	required when reinstaling)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financi Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
NAME STREET ADDRESS GITY-ST-ZIP	PSTD LINO, JOAN 704 CADIZ ROAD VENICE, FL 34285				
TITLE NAME STREET ABORESS CITY-ST-ZIP					000000434950 02/25/06-80023-003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREEY ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS					

12. Thereby 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 effect 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 written address, with all other like empowered.

SIGNATURE:

CITY-ST-IP

TITLE
NAME
STREET ADDRESS
CITY-ST-IP

Joan Juno

7/13/06 941-416-01: