

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 07, 2007 8:00 am**  
**Secretary of State**

02-07-2007 90046 049 \*\*\*150.00

DOCUMENT # P04000131225

1. Entity Name

HOLLYWOOD FAM, INC.



Principal Place of Business

1720 S.W. 110TH TERRACE  
DAVIE FL 33324

Mailing Address

1720 S.W. 110TH TERRACE  
DAVIE FL 33324

2. Principal Place of Business - No P.O. Box #

9420 E. Southgate DRIVE

Suite, Apt. #, etc.

3. Mailing Address

9420 E. Southgate DRIVE

Suite, Apt. #, etc.

City & State

INVERNESS, FL

City & State

INVERNESS, FL

4. FEI Number

06-1733224

Applied For

Not Applicable

Zip

34450

Country

CITRUS

Zip

34450

Country

CITRUS

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GUMBEL, LAURA M  
1720 S.W. 110TH TERRACE  
DAVIE FL 33324

7. Name and Address of New Registered Agent

Name GUMBEL, LAURA M

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

9420 E. Southgate DRIVE

City

INVERNESS

FL

Zip Code

34450

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 *Laura M Gumbel*

Signature, typed or printed name of registered agent and title - applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/31/07

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2007 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 PVD  
NAME GUMBEL, LAURA M  
STREET ADDRESS 1720 S.W. 110TH TERRACE  
CITY - ST - ZIP DAVIE FL 33324 ☐ Delete

TITLE STD  
NAME FAVARATO, ROBERT C  
STREET ADDRESS 5201 W. PARK ROAD  
CITY - ST - ZIP HOLLYWOOD FL 33021 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVD  
NAME GUMBEL, LAURA M  
STREET ADDRESS 9420 E. Southgate DRIVE  
CITY - ST - ZIP INVERNESS, FL 34450 ☒ Change ☐ Addition

TITLE STD  
NAME FAVARATO, ROBERT C.  
STREET ADDRESS 13899 NE 38TH AVE  
CITY - ST - ZIP ANTHONY, FL 32617 ☒ Change ☐ Addition

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

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

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

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

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: *Laura M Gumbel, PVD*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LAURA M. GUMBEL 1/31/07 352-560-0046

Date

Daytime Phone #