2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 20, 2006 8:00 am **Secretary of State** DOCUMENT # P04000168037 1. Entity Name 02-27-2006 90087 018 \*\*\*150.00 V.M. MANNINO'S, INC. Principal Place of Business Mailing Address 6900 NW 28TH STREET MARGATE FL 33063 6900 NW 28TH STREET MARGATE FL 33063 2. Principal Place of Business 3. Mailing Address 14-1917231 Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/05) 1st MOORE City & State City & State Applied For AP-PLIED FOR Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MANNINO, VINCENT M Street Address (P.O. Box Number is Not Acceptable) 6900 NW 28TH STREET MARGATE FL 33063 Zip Code 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 SIGNATURE Signature. Hyped or printed inerne of registered agent and late if expectative. (NOTE: Registered Agent signature resoured when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State? OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Detete DILE Change Addition MALES MANNINO, VINCENT M STREET ADDRESS 6900 NW 28TH STREET STREET ADDRESS CITY-51-72 MARGATE FL 33063 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition MANNINO, VINCENT M NAME NAME STREET ADDRESS 6900 NW 28TH STREET STREET ADDRESS City-ST-ZIP MARGATE FL 33083 CITY-ST-ZIP TTELE ☐ Detete TITLE ☐ Change ☐ Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-7IP TITLE Oalete DDF Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-77P CITY-ST-ZIP Ims □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THLE Delete HILE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7-P 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 attackment with an address, with all other like empowered. SIGNATURE/

FILED



Division of Corporations

March 2, 2006

V.M. MANNINO"S, INC. 6900 NW 28TH STREET MARGATE, FL 33063

Subject: V.M. MANNINO'S, INC.

Reference Number:

∑P04000168037

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Because our records reflect the above referenced entity previously applied for its Federal Employer Identification (FEI) Number, it must now include its FEI number on the annual report/uniform business report or attach a photocopy of the FEI number application to the document before we can complete your filing.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JE ANNUAL REPORTS SECTION