

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 05, 2006 8:00 am
Secretary of State

03-23-2006 90014 042 ***150.00

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1st MOORE CR2E034 (10/05)

DOCUMENT # P05000003741

1. Entity Name
NICO DEVELOPMENT, INC.



Principal Place of Business
**1937 EAST ATLANTIC BOULEVARD
SUITE 9
POMPANO BEACH FL 33060**

Mailing Address
**1937 EAST ATLANTIC BOULEVARD
SUITE 9
POMPANO BEACH FL 33060**

2. Principal Place of Business
Suite, Apt **CHANGE of Place of Business & Mailing Address.**
2101 N Andrews Ave, Suite 107

3. Mailing Address
City & St **Wilton Manors, FL 33311**

Zip Country Zip Country

4. FEI Number **13-4242069** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when restoring)

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BEESON, JAMES M JR. 1937 EAST ATLANTIC BOULEVARD #9 POMPANO BEACH FL 33060 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2101 N Andrews Ave, Suite 107 Wilton Manors, FL 33311 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD BEESON, MARY 1937 EAST ATLANTIC BOULEVARD #9 POMPANO BEACH FL 33060 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2101 N Andrews Ave, Suite 107 Wilton Manors, FL 33311 ☒ Change ☐ Addition
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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: **X** *[Signature]* **3/15/2006** **954-563-8903**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #