



# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90389 023 \*\*\*150.00

<b>DOCUMENT # P05000005551</b> 1. Entity Name <b>BINI &amp; REMA, INC.</b>																											
Principal Place of Business <b>4125 N. US 1</b> <b>COCOA, FL 32927</b>		Mailing Address <b>4125 N. US 1</b> <b>COCOA, FL 32927</b>																									
2. Principal Place of Business <b>3480 Golden Street</b> Suite, Apt. #, etc.		3. Mailing Address <b>3480 Golden Street</b> Suite, Apt. #, etc.																									
City & State <b>Titusville Fl.</b> Zip <b>32796</b>		City & State <b>Titusville</b> Zip <b>32796</b>																									
4. FEI Number <b>65-1257011</b>		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent  <b>PATEL, VINESH R</b> <b>4125 N. US 1</b> <b>COCOA, FL 32927</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ (NOTE: Registered Agent signature required when consisting)																											
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:65%;">D</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>PATEL, VINESH R</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4125 N. US 1</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>COCOA, FL 32927</td> <td></td> </tr> </table>		TITLE	D	<input type="checkbox"/> Delete	NAME	PATEL, VINESH R		STREET ADDRESS	4125 N. US 1		CITY-ST-ZIP	COCOA, FL 32927		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">TITLE</td> <td style="width:65%;">P/T</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>PATEL VINESH</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3480 Golden St, Titusville</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FL 32796</td> <td></td> </tr> </table>		TITLE	P/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	PATEL VINESH		STREET ADDRESS	3480 Golden St, Titusville		CITY-ST-ZIP	FL 32796	
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12. I hereby certify that the information supplied with this filing 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 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:** 

**4/26/06**

**321-269-9310**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date
Daytime Phone #