

2006 FOR PROFIT CORPORATION ANNUAL REPORT: (AR)

2/1

FILED
Mar 06, 2006 8:00 am
Secretary of State

02-06-2006 90097 034 ***150.00

DOCUMENT # P05000041275			
1. Entity Name BEVERLY'S CANADIAN CONNECTION, INC.			
Principal Place of Business 2 A SOUTHPORT LANE BOYNTON BEACH FL 33436		Mailing Address 2 A SOUTHPORT LANE BOYNTON BEACH FL 33436	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Name and Address of Current Registered Agent COHEN, DONALD 2 A SOUTHPORT LANE BOYNTON BEACH FL 33436		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
B. 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 <i>Donald Cohen</i>		DATE <i>1/24/06</i>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 fee will be \$650.00 Make Check Payable to Florida Department of State		8. 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	☐ Delete COHEN, BEVERLY 2 A SOUTHPORT LANE BOYNTON BEACH FL 33436	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ 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 disclosed 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: <i>Beverly S Cohen</i>		DATE: <i>1/24/06</i> 561-732-4488	

66003744

1/24/06

1st MOORE

CR2E034 (10/05)

4. FEI Number

51-0527625

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COHEN, DONALD
2 A SOUTHPORT LANE
BOYNTON BEACH FL 33436

Name

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

City

FL

Zip Code

B. 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

Signature is valid for 12 months from date of registration and fee is applicable

NOTE: Registered Agent signature required when filing

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 fee will be \$650.00

Make Check Payable to Florida Department of State

8. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be

Added to Fees

10.

OFFICERS AND DIRECTORS

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

COHEN, BEVERLY
2 A SOUTHPORT LANE
BOYNTON BEACH FL 33436☐ Delete

TITLE

NAME

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CITY - ST - ZIP

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Phone #



ATTACHMENT

66003744

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2006

BEVERLY'S CANADIAN CONNECTION, INC.
2 A SOUTHPORT LANE
BOYNTON BEACH, FL 33436

Subject: BEVERLY'S CANADIAN CONNECTION, INC.

Reference Number: P05000041275

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

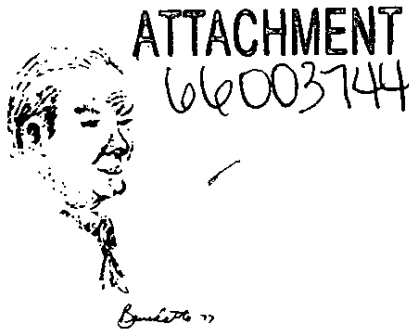
Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you **MUST** now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

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.

/MH
ANNUAL REPORTS SECTION

P.O. BOX 6327 - Tallahassee, Florida 32314



DONALD PANAMA COHEN'S
DIVIDEND ENHANCEMENT PROGRAM

3/1/06

Florida Dept. of State
Annual Reports Section
P.O. Box 6327
Tallahassee, FL 32314

PO5000041275

Gentlemen,
Re your letter of 2/8/06 - see
Completed Box 4!

Thank you
Donald P. Cohen

DEP ASSOCIATES
DONALD P. COHEN INVESTMENT ADVISOR

2-A SOUTHPORT LANE • BOYNTON BEACH, FL 33436
(561) 732-4488 FAX: (561) 734-9759