

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

4 May 05, 2006 8:00 am
Secretary of State

04-03-2006 90381 031 ***150.00

DOCUMENT # P05000043362

1. Entity Name
BRIKA MANAGEMENT, INC.



Principal Place of Business
23238 MARSH LANDING BLVD
ESTERO, FL 33928 US

Mailing Address
23238 MARSH LANDING BLVD
ESTERO, FL 33928 US

60011000



2. Principal Place of Business

3. Mailing Address

PO BOX 64

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03272006 Chg-P CR2E034 (11/05)

City & State

City & State
METHUEN, MA

4. FEI Number

20-2544526

Applied For
Not Applicable

Zip

Country

Zip
01844

Country
USA

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

SHEEHY, BRIAN
23238 MARSH LANDING BLVD
ESTERO, FL 33928

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

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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 SHEEHY, BRIAN 23238 MARSH LANDING BLVD ESTERO, FL 33928	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SHEEHY, BRIAN 23238 MARSH LANDING BLVD ESTERO, FL 33928	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHEEHY, BRIAN 23238 MARSH LANDING BLVD ESTERO, FL 33928	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

Brian Sheehy officer

3-25-06

978 683-3574

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #