


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 20, 2006 8:00 am**  
**Secretary of State**

01-20-2006 90028 022 \*\*\*150.00

**DOCUMENT # P05000093728**

1. Entity Name  
**OCCABOT PROPERTIES, INC.**



Principal Place of Business  
**2900 SW 28TH TERRACE**  
**5TH FLOOR**  
**MIAMI, FL 33133**

Mailing Address  
**2900 SW 28TH TERRACE**  
**5TH FLOOR**  
**MIAMI, FL 33133**

**66001859**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

01062006 Chg-P CR2E034 (11/05)

City & State

4. FEI Number  
**20-3106231**

Applied For  
 Not Applicable

Zip Country

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

**6. Name and Address of Current Registered Agent**

**CHRISTIN, NICHOLAS E**  
**2900 SW 28TH TERRACE**  
**5TH FLOOR**  
**MIAMI, FL 33133**

**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 reinstating)

**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**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>CHRISTIN, NICHOLAS E</b> <b>2900 SW 28TH TERRACE - 5TH FLOOR</b> <b>MIAMI, FL 33133</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  **1/6/06** **305-448-3939**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

LAW OFFICES  
**WICKER, SMITH, O'HARA  
McCOY, GRAHAM & FORD, P.A.**

GROVE PLAZA BUILDING, 5TH FLOOR  
2900 MIDDLE STREET (S.W. 28TH TERRACE)

MIAMI, FLORIDA 33133

(305) 448-3939

FAX (305) 441-1745

WWW.WICKERSMITH.COM

**ATTACHMENT 6000189**  
**#P05 000093728**

**FORT LAUDERDALE**

(954) 847-4800

**WEST PALM BEACH**

(561) 689-3800

**ORLANDO**

(407) 843-3939

**TAMPA**

(813) 222-3939

**NAPLES**

(941) 430-1120

**JACKSONVILLE**

(904) 355-0225

February 15, 2006

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Occabot Properties, Inc.  
Our File No.: 39081-2

Dear Sir or Madam:

In furtherance of your letter of January 25, 2006 (copy enclosed), I return herewith the 2006 For Profit Corporation Annual Report which now contains the Federal Employer Identification Number.

If you have any questions, please call me. Thank you for your attention to this matter.

Very truly yours,



Nicholas E. Christin

NEC/kfp  
Enclosure



ATTACHMENT

66001859  
#P05000093728

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 25, 2006

OCCABOT PROPERTIES, INC.  
2900 SW 28TH TERRACE  
5TH FLOOR  
MIAMI, FL 33133

Subject: OCCABOT PROPERTIES, INC.

Reference Number: P05000093728

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.

/cc

ANNUAL REPORTS SECTION