

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P92000014772

1. Entity Name
CEEBRAID-SIGNAL CORPORATION



Principal Place of Business

250 AUSTRALIAN AVE. SOUTH
STE. 1003
WEST PALM BEACH, FL 33401

Mailing Address

250 AUSTRALIAN AVE. SOUTH
STE. 1003
WEST PALM BEACH, FL 33401



05052005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
11-3138727

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SCHLESINGER, RICHARD
250 AUSTRALIAN AVE., SOUTH
10TH FLOOR, SUITE 1003
WEST PALM BEACH, FL 33401

**DO NOT WRITE
IN THIS SPACE**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D
NAME SCHLESINGER, RICHARD
STREET ADDRESS 801 S COUNTY RD
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE D
NAME WEINSTEIN, WILLIAM D
STREET ADDRESS 72 NASSAU DR
CITY-ST-ZIP GREAT NECK, NY 11021

TITLE D
NAME SCHLERINGE, ADAM
STREET ADDRESS 250 AUSTRALIAN AVE S
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

1100000375711
08/19/05-80003-004 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Richard Schlesinger, Director