

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000051789		
1. Entity Name THE RUSTICA COLLECTIONS, INC.		
Principal Place of Business 701 NW 25TH AVENUE BOCA RATON, FL 33445 US		Mailing Address 701 NW 25 AVE DELRAY BEACH, FL 33445 US
DO NOT WRITE IN THIS SPACE		
		03162006 No Chg-P CR2E034 (11/05)
4. FEI Number 65-0425464		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent FEIGENBAUM, DAVID 1700 W WOLLBRIGHT RD #6 BOYNTON BEACH, FL 33426		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 <u><i>John Selney</i></u> (NOTE: Registered Agent signature required when registering) Signature typed or printed name of registered agent and title (if applicable) DATE <u>4-4-06</u>		
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
		U000001494789 04/20/06-80059-021 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOLNEY, JOYCE 701 NW 25 AVE DELRAY BEACH, FL 33445	
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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: <u><i>John Selney</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4-4-06 561.330-9133 Date Daytime Phone #