

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # P94000077322

1. Entity Name
SKIPPER PUBLISHING, INC.



Principal Place of Business

**2105 NW 102 AVE.
MIAMI, FL 33172**

Mailing Address

**2105 NW 102 AVE.
C/O SOUTHEAST PERIODICALS & BOOK SALES
MIAMI, FL 33172**



02282006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0548184

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BRUNJES, ROBERT
2105 NW 102 AVE.
MIAMI, FL 33172-1983**

**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
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
**D
GELFAND, WILMA
ONE EXECUTIVE DR #151
SOMERSET, NJ 08873**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GELFAND, DANIEL
ONE EXECUTIVE DR #151
SOMERSET, NJ 08873**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GELFAND, DOUGLAS
ONE EXECUTIVE DR #151
SOMERSET, NJ 08873**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BOHORQUES, JOSE A
9385 SW 21 ST.
MIAMI, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROMERO, ORLANDO
2105 NW 102 AVE.
MIAMI, FL 33172**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000156249
03/16/06 80021-012 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

Orlando Romero 3/2/06 905-592-3919
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #