2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000017789

SCOTT, KINZEL C

6565 TAFT ST STE #104

HOLLYWOOD, FL 33024

Name:

Address:

City-St-Zip:

Entity Name: BEHNKE & ASSOCIATES, INC

FILED Feb 03, 2006 Secretary of State

Entity Name: BEHINKE & ASSOCIATES, INC.							
Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:			
6565 TAFT SUITE 104 HOLLYWO		4					
Current M	lailing Addre	ss:	New Maili	New Mailing Address:			
6565 TAFT SUITE 104 HOLLYWO		4					
FEI Number:	: 65-0563274	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired	()	
Name and	Address of (Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
HRAWG C 1801 N MII BOCA RA	CORP LITARY TRAIL TON, FL 3343	., SUITE 200 31 US	C/O KATŹ 100 N.E. T	TRAPANI, CHRISTPHER M C/O KATZ, BARRON ET AL. 100 N.E. THIRD AVENUE., SUITE # 280 FT. LAUDERDALE, FL 33301 US			
	named entity e of Florida.	submits this statement for the p	purpose of changing i	ts registered	office or registered agent, o	r both,	
SIGNATUR	RE: CHRISTO	OPHER M. TRAPANI		02/03/2006			
	Electro	nic Signature of Registered Ag	ent		Date		
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P (BEHNKE, FRE 6565 TAFT ST HOLLYWOOD	STE 104	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP (INTRACASO, N 6565 TAFT ST HOLLYWOOD	., STE 104	Title: Name: Address: City-St-Zip:	VP (; INTROCASO, 6565 TAFT ST HOLLYWOOD	Г., STE 104		
Title: Name: Address: City-St-Zip:	VP (MCFADDEN, G 6565 TAFT ST HOLLYWOOD	STE #104	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title:	VP () Delete	Title:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: FRED BEHNKE P 02/03/2006