

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90356 026 ***158.75

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DOCUMENT # P95000019866 1. Entity Name THE RICHARD BRANDON COMPANY			
Principal Place of Business 1501 SUNSET DRIVE, 2ND FLOOR CORAL GABLES, FL 33143		Mailing Address 1501 SUNSET DRIVE, 2ND FLOOR CORAL GABLES, FL 33143	
2. Principal Place of Business 7301 SW 57 COURT Suite, Apt. #, etc. #440		3. Mailing Address 7301 SW 57 COURT Suite, Apt. #, etc. #440	
City & State SOUTH MIAMI, FL Zip 33143		City & State SOUTH MIAMI, FL Zip 33143	
Country USA		Country USA	
4. FEI Number 65-0560612		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MATTAWAY, L. RICHARD 1501 SUNSET DR 2NF FLR CORAL GABLES, FL 33143		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 7301 SW 57 COURT SUITE #440 City SOUTH MIAMI FL Zip Code 33143	
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 _____ (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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATTAWAY, L. RICHARD 1501 SUNSET DR 2ND FLR CORAL GABLES, FL 33143	☐ Delete	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LURIE, BRANDON 1501 SUNSET DR 2ND FLR CORAL GABLES, FL 33143	☐ Delete	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LURIE, BRANDON 1501 SUNSET DR 2ND FLR CORAL GABLES, FL 33143	☐ Delete	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LURIE, BRANDON 1501 SUNSET DR 2ND FLR CORAL GABLES, FL 33143	☐ Delete	☒ Change ☐ Addition
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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:		4/17/06 Date	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR L.R. Mattaway		305-662-1421 Daytime Phone #	