

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 08:00 A
Secretary of State

DOCUMENT # P95000061308

1. Entity Name
THE BEN TOBIN COMPANIES, INC.



Principal Place of Business
1101 HILLCREST DRIVE
HOLLYWOOD, FL 33021

Mailing Address
1101 HILLCREST DRIVE
HOLLYWOOD, FL 33021



04122007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3332841	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

DAMIAN, VINCENT E JR.
80 S.W. 8TH STREET
SUITE 2550
MIAMI, FL 33130

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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	PD TOBIN, HERBERT A 1101 HILLCREST DRIVE HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DAMIAN, VINCENT E JR. 80 S.W. 8TH STREET, SUITE 2550 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASVP FALCONI, NATASHA 1101 HILLCREST DRIVE HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD TOBIN, JASON 1101 HILLCREST DRIVE HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOBIN, MARK 1101 HILLCREST DRIVE HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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05/23/07-80040-007 150.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-07

Date

Daytime Phone #