


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 18, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P95000067677</b>	
1. Entity Name <b>BOCCARD HOMES &amp; KESSLER CONSTRUCTION INC.</b>	

Principal Place of Business <b>7766 NORTHWEST 25TH STREET MARGATE, FL 33063 US</b>	Mailing Address <b>7766 NORTHWEST 25TH STREET MARGATE, FL 33063 US</b>
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08112006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0621359</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**KESSLER, LAWRENCE M  
7766 NORTHWEST 25TH STREET  
MARGATE, FL 33063**

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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 *Lawrence M. Kessler* DATE 08/15/06

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

<b>FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE <b>P</b>	<b>KESSLER, LAWRENCE M</b>
NAME	<b>7766 N.W. 25TH STREET</b>
STREET ADDRESS	<b>MARGATE, FL 33063</b>
CITY-ST-ZIP	
TITLE <b>VP</b>	<b>BOCCARD, VINCENT</b>
NAME	<b>9504 NW 10TH MANOR</b>
STREET ADDRESS	<b>POMPANO BEACH, FL 33065</b>
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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08/18/06-80005-023 150.00

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: *Lawrence M. Kessler* DATE 08/15/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR