## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

## Apr 28, 2006 08:00 AM Secretary of State **DOCUMENT # P95000081685** CCI OF WEST BOCA RATON, INC. Principal Place of Business Mailing Address 9918 GLADES ROAD 1371 PALMETTO PARK RD BOCA RATON, FL 33434 BOCA RATON, FL 33486 04252006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 65-0614086 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SIEGEL, NAT DO NOT WRITE 1371 PALMETTO PARK RD BOCA RATON, FL 33486 IN THIS SPACE 3. 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. (NOTE, Registered Agent signature required when reinstating) 5. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME COSENTINO, JAMES A U00000542923 85/10/06-80117-013 150.00 **4225 GENESEE ST** STREET ADDRESS CHTY-ST-ZIP BUFFALO, NY TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. It hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chepter 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 cath; 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 ettachment with an address, with all other like empowered.

**FILED**