2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000040434

1. Entity Name BERNEY & ASSOCIATES, P.A.

FILED Feb 01, 2006 08:00 AN Secretary of State

Daytime Phone #

Principal Place of Business

9700 SOUTH DIXIE HIGHWAY

#500 MIAMI, FL 33156

CITY-ST-ZIP

SIGNATURE:

Mailing Address

9700 SOUTH DIXIE HIGHWAY

#500 MIAMI, FL 33156

WI, FL 33130



DO NOT WRITE IN THIS SPACE				01292006	01292006 No Chg-P CR2E034 (11/05)			
				4. FEI Number 65-0664988			Applied For Not Applicable	
				5. Certificate	e of Status Desired	\$8.75 Fee Re	Additional quired	
	6. Name and Address of Current Regis	stered Agent	- <u></u> ,	<u>-</u>				
TOLAND, BRUCE J 80 SW 8TH STREET STE 1925 MIAMI, FL 33130				DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the pons of registered agent.						with, and accept	
Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered				required when remstating)	,	ATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees	UQQ0000414			
10.	OFFICERS AND DIRE	CTORS			<u> </u>	43-002	150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DP BERNEY, ROBERT 9700 S DIXIE HWY #500 MIAMI, FL 33156						-	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRI	TE	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPAC	CE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·			•	•		
TITLE NAME STREET ADDRESS								

12. I hereby certify that the information supplied with this filting 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 received or trustee empowered to execute this report as regulated 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 bliner like empowered.

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER