


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000064616
 1. Entity Name
AL'S FAMOUS FILLED BAGELS, INC.



Principal Place of Business Mailing Address
9990 S.W. 77TH AVENUE **9990 S.W. 77TH AVENUE**
PH 8 **PH 8**
MIAMI, FL 33156 **MIAMI, FL 33156**



04172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0705856** Applied For
 Not Applicable
 5. Certificate of Status Destroyed **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent
BURGER, SANDRA
9990 SW 77 AVE PH 8
MIAMI, FL 33156

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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 re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$350.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BURGER, ALVIN
STREET ADDRESS	9990 SW 77TH AVE PH 8
CITY-STATE-ZIP	MIAMI, FL
TITLE	VPT
NAME	BURGER, SANDRA
STREET ADDRESS	9990 SW 77TH AVE PH 8
CITY-STATE-ZIP	MIAMI, FL
TITLE	VP
NAME	BURGER, ANDREW
STREET ADDRESS	9990 SW 77 AVE PH 8
CITY-STATE-ZIP	MIAMI, FL 33156
TITLE	VP
NAME	BURGER-GREENBERG, SUSAN
STREET ADDRESS	9990 SW 77 AVE PH 8
CITY-STATE-ZIP	MIAMI, FL 33156
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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 05/16/06-80034-010 150.00

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 empowerments.

SIGNATURE: **X** *[Signature]* **BURGER** 4/18/06 305-271-5757
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #