

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90151 007 ***150.00

DOCUMENT # P96000073753

1. Entity Name
BRANCO ENTERPRISES, INC.



Principal Place of Business
**7145C NORTH 9TH AVE
PENSACOLA, FL 32504 US**

Mailing Address
**6706 N 9th Ave
C-6
PENSACOLA, FL 32504 US**

50009020



2. Principal Place of Business

3. Mailing Address

6847AN 9th Ave.,

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#365

02142006

Chg-P

CR2E034 (11/05)

City & State

City & State
Pensacola, FL

4. FEI Number
59-3402027

Applied For

Not Applicable

Zip

Country

Zip

Country

32504

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WARD, BRANDON
4211 LANCASTER GATE
PACE, FL 32571**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
WARD, BRANDON
4211 LANCASTER GATE
PACE, FL 32571** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

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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

3/31/06

Date

850-479-3066

Daytime Phone #