


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 10, 2006 8:00 am**  
**Secretary of State**

07-25-2006 90029 032 \*\*\*558.75

DOCUMENT # P96000103200	
1. Entity Name BERNICE ORKIN KAYE FAMILY CORPORATION	

Principal Place of Business 201 S BISCAYNE BLVD SUITE 1600 MIAMI, FL 33131	Mailing Address 201 S BISCAYNE BLVD SUITE 1600 MIAMI, FL 33131
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**DO NOT WRITE IN THIS SPACE**



07052006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0731912	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  NOSTRO, LOUIS 728 CATALONA AVENUE CORAL GABLES, FL 33134
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**DO NOT WRITE  
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 *Louis Nostro* DATE 7/20/06  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 6, 2006**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>D/P/S</i> <i>KAYE, BERNICE ORKIN</i> <i>6500 COLLING AVE, PMB</i> <i>MIAMI BEACH, FL 33140</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>* SILVER, ARLENE</i> <i>6586 Daniel Court</i> <i>Fort Myers, FL 33908</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>KAYE, STUART</i> <i>1556 Serenity Circle</i> <i>Naples, FL 34110</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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: *Arleene K. Silver* DATE 7/20/06 DAYTIME PHONE # 239-481-4245  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**SHUTTS  
&  
BOWEN  
LLP**

LOUIS NOSTRO  
DIRECT LINE (305) 379-9164  
FLORIDA BAR BOARD CERTIFIED  
IN THE AREAS OF TAXATION  
WILLS, TRUSTS & ESTATES

ATTORNEYS AND COUNSELLORS AT LAW

EMAIL ADDRESS:  
LNOSTRO@SHUTTS-LAW.COM

**ATTACHMENT**

66032885

July 20, 2006

Division of Corporations  
P.O. Box 6198  
Tallahassee, Florida 32314

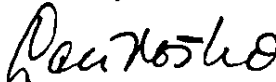
Re: **Bernice Orkin Kaye Family Corporation**  
**Document No.: P96000103200**

Gentlemen:

I enclose for filing the 2006 For Profit Corporation Annual Report for *Bernice Orkin Kaye Family Corporation*, along with a check for \$558.75 (to cover \$550 for the late filing fee and \$8.75 for a certificate of status). A return envelope is enclosed for your convenience.

Please contact me if you have any questions. Thank you for your assistance.

Sincerely,



Louis Nostro

Enclosures

MIADOCs 948070 1

1500 MIAMI CENTER • 201 SOUTH BISCAYNE BOULEVARD • MIAMI, FLORIDA 33131 • TELEPHONE (305) 358-6300 • FACSIMILE (305) 381-9982 • WEBSITE: [www.shutts-law.com](http://www.shutts-law.com)

MIAMI

FORT LAUDERDALE

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