2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 13, 2006 8:00 am Secretary of State 02-13-2006 90045 026 ***150.00

DOCUMENT # P97000076075 1. Entity Name MULTIBROKERS, INC.				02-13-2006	90045 026 ***15	60.00	
Principal Plac	e of Business	Mailing Address	_!		400-		
· · · · · · · · · · · · · · · · · · ·		C/O LYNN & GAIL HATCHER			•		
MIDDLEBURG, FL 32068		3128 RAVINES ROAD		,			
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2. Principal Place of Business		3. Mailing Address 0/0 Gail Hatcher		[[[[
Suite, Apt. #, etc.		Suite, Apr. #, etc. 3128 Ravines Road		01192006	Chg-P	CR2E034 (11/05)	
City & State		City & State		4. FEI Numb	er	A	pplied For
		Middleburg, F	- し	59-292	0480		ot Applicable
Zip	Country	Zip 32068 Con	untry	5. Certificate	of Status Desired	□ \$8.75 Ad Fee Require	
	6. Name and Address of Current	Registered Agent	- 	7. Name and	Address of New I	Registered Agent	
			Name		111111111111111111111111111111111111111		
	R, L GAIL PTS		Over Address (O.O. Co. M. obes in Man Assessable)				
3128 RAVINES RD. MIDDLEBURG, FL 32068			Street Address (P.O. Box Number is Not Acceptable)				
MIDDLED	UKG, FL 32006						
			City			□ Zip Coc	 le
						FL	
	named entity submits this statement to ions of registered agent.	r the purpose of changing its registe	ered office or reg	gistered agent, or bo	th, in the State of F	lorida. I am familiar with,	and accept
inc congu	ions of rogists of agont.						
SIGNATURE.	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Registe	ered Agent signature re	equired when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00	posins	* 5.00				
AILEI III	ay 1, 2006 Fee will be \$550.0	9. Election Campaign Fin Trust Fund Contribution		\$5.00 May Be Added to Fees			
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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 attachreent with an address, with all other like empowered.