## 2006 FOR PROFIT CORPORATION

## 2006 08·00 AM

ANNUAL REPORT			rep 23, 2000 08:00 A		
DOCUMENT # P980000			Secr	etary of State	
EARÉ BRONSTEEN STUDIO/GAL	LERY, INC.				
Principal Place of Business	Mailing Address		]		
1141 HOLLAND DRIVE	1141 HOLLAND DRIVE				
#30 Boca raton, FL 33487 US	#30 Boca raton, FL 33487 - D	)S		TE HETEL LETTL BEHAVI SERVI DE	
DO NOT WRITE IN THIS SPACE			01042006	No Chg-P	CR2E034 (11/05)
	<b>₩</b>	4. FE! Numb 65-081		Applied For Not Applicable	
			5. Certificate	of Status Destred	S8.75 Additional Fee Required
6. Name and Address of Curr	ent Registered Agent	1			
BRONSTEEN, EARL 1141 HOLLAND DRIVE #30		DO	NOT W	RITE	
BOCA RATON, FL 33487			IN T	THIS SF	PACE
			111		AUL
The above named entity submits this statement the obligations of registered agent.	it for the purpose of changing its register	rad office or registe	red agent, or bo	4 }	, _,
SIGNATURE Signature, typod or printed name of tegrateries agent and title 4 applicable (NOTE. Registered A			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.			.00 May Be led to Fees		
	NO DIRECTORS			1.	
I TILE D BRONSTEEN, EARL		1			
STREET ADDRESS 1141 HOLLAND DRIVE #30		1			
CITY-ST-ZIP BOCA RATON, FL 33487		_		ມຸດດູດ	0444120
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CITY-SI-ZIP		4			
TITLE NAME		1			

12. I hereby certify that the information supplied with this fling 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 husband 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

Date

Date

Descriptions

Date

Descriptions

STREET ADDRESS CITY-ST-ZIP