


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90004 036 ***150.00

DOCUMENT # P98000007112 1. Entity Name DAVID M. GRUBER, CPA, PA	
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Principal Place of Business 5150 TAMiami TRAIL N #205 NAPLES, FL 34103 US	Mailing Address 5150 TAMiami TRAIL N #205 NAPLES, FL 34103 US
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01272006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0808686	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent GRUBER, DAVID M 5150 TAMiami TRAIL NORTH #205 NAPLES, FL 34103
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRUBER, DAVID M 220 TIMBER LAKE CIRCLE, #103 NAPLES, FL 34104
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GRUBER, MICHELE 220 TIMBER LAKE CIRCLE, #103 NAPLES, FL 34104
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**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 supplement 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 title empowered.

SIGNATURE:  DAVID GRUBER <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	2/9/06 <small>Date</small>	2394302424 <small>Daytime Phone #</small>
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