

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

APPROVAL
AND
FILED

06 JAN 31 AM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01182006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0815673	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GABILOVE, STEPHEN
2431 NE 32 CT
LIGHTHOUSE POINT, FL 33064

**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

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

TITLE	PDS
NAME	GABRIBLOVE, STEPHEN
STREET ADDRESS	2431 NE 32 CT
CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33064

TITLE	
NAME	
STREET ADDRESS	
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02/14/06--01049--021 **205.00

**DO NOT WRITE
IN THIS SPACE**

K. Eckerl FEB 02 2006

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: Stephen Gabrilove
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/06 (954) 709-8101
Date Daytime Phone #