

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 14, 2006 8:00 am**  
**Secretary of State**

08-14-2006 90041 011 \*\*\*150.00

**DOCUMENT # P98000064788**

1. Entity Name  
**BRUCES' BIG BOXES, INC.**



Principal Place of Business	Mailing Address
3645 NORTHWEST 7TH STREET MIAMI, FL 33125	3645 NORTHWEST 7TH STREET MIAMI, FL 33125
630 SAN LORENZO AVE CORAL GABLES, FL 33146	630 SAN LORENZO AVE CORAL GABLES, FL 33146

**40101405**



08042006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0859978</b>	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**HAYES, MARLON C**  
**3645 NW 7 ST** **630 SAN LORENZO AVE**  
**MIAMI, FL 33125** **CORAL GABLES, FL 33146**

**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**  
**Due by September 6, 2006**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD HAYES, BRUCE M 3645 NORTHWEST 7TH STREET MIAMI, FL 33125
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD HAYES, MARLON C 3645 NORTHWEST 7TH STREET MIAMI, FL 33125
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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:** *Marlon C. Hayes* **MARLON C. HAYES**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*8/14/06* **8/14/06-305-2970975**  
Date Daytime Phone #

ATTACHMENT

40101405

August 4, 2006

Florida Department of State  
Division of Corporations  
P. O. Box 6198  
Tallahssee, FL 32314

Re: BRUCES' BIG BOXES, INC., 2006 FOR PROFIT CORPORATION ANNUAL REPORT

Dear Sir:

Enclosed is my 2006 FOR PROFIT CORPORATION ANNUAL REPORT and my check in the amount of \$150. I moved at the end of "2005" and never received the annual report form.

Please waive any penalties. This corporation has always paid its annual tax on time. A penalty would create a hardship for me.

Thank you for your consideration.

Very truly yours,



Marlon C. Hayes, Vice-President  
Bruces' Big Boxes, Inc.  
630 San Lorenzo Avenue  
Coral Gables, FL 33146  
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