


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000105201 1. Entity Name CANBEC INVESTMENT CORPORATION	
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Principal Place of Business 201 HOLLOWBROOK CIRCLE DAYTONA BEACH, FL 32114 US	Mailing Address 201 HOLLOWBROOK CIRCLE DAYTONA BEACH, FL 32114 US
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DO NOT WRITE IN THIS SPACE



06172006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3551252	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

GOEDIKE, GINETTE
1127 FLAGSTONE DR.
DAYTONA BEACH, FL 32118

**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)

U000000567398
06/19/06 080000 010 150.00

**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	VP GOEDIKE, GINETTE 1127 FLAGSTONE DR. DAYTONA BEACH, FL 32118
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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/12/06 (386) 295-4250
Date Daytime Phone #