## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED **DOCUMENT # P99000006282** 1. Entity Name 06 MAY 15 PM 1: 35 MCCRORY DESIGN ASSOCIATES, INC. TALL AND THE STATE Mailing Address Principal Place of Business 1632 PENNSYLVANIA AVE. 1632 PENNSYLVANIA AVE. MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 CR2E034 (11/05) No Chg-P 04132006 DO NOT WRITE IN THIS SPACE 4. FEI Number 52-2148266 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROBINS, CRAIG DO NOT WRITE 1632 PENNSYLVANIA AVENUE MIAMI, FL 33139 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\_ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable \$5.00 May B64 D D D T S 2 2 1 7 6 4 Added to F665/25/06--01011--003 \*\*482.50 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS D٢ TITLE ROBINS, CRAIG 1632 PENNSYLVANIA AVENUE STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 VP TITLE GRETENSTEIN, STEVEN NAME 1632 PENNSYLVANIA AVENUE STREET ADDRESS MIAMI BEACH, FL 33139 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ied with this filing tops not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 empower of to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if I hereby certify that the information indicated on this report or supplers of the corporation or the receiver address, with Re empowered. ASSOCIATES, INC.

SIGNING OFFICER OR DIRECTOR

Vice President

417106

305-531-870b