2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

	MITITORE II	\neg Table 0.2. 2007 00.00 ANT		
DOCU 1. Entity Nam	MENT # P990000073	6		Feb 03, 2006 08:00 AM Secretary of State
DINKINS & DINKINS, INC.				
Principal Place of Business Mailing Address				
101 NORTHEAST 16TH AVENUE OCALA FL 34470		101 NORTHEAST 16TH AVENUE OCALA FL 34470		
2. Principal Place of Business		3. Mailing Address		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Suite, Apt. #, etc.		Suite, Apt, It, etc.		1st MOORE CR2E034 (10/05)
City & State		City & State		4. FEI Number 59-3567557 Applied For Not Applied
Zip	Country	Zip	Country	Certificate of Status Desired
6. Name and Address of Current Registered Agent			Name of the state	7. Name and Address of New Registered Agent
DINKINS, C L'JR.			Name	
101 NORTHEAST 16TH AVENU OCALA FL 34470		E	Street Addres	s (P.O. Box Number is Not Acceptable)
			City	- 1 7 Oct
				FL Zip Code
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 according to obligations of registered agent.				
SIGNATURE Signature, typed or printed minner of registered agent and title it applicable (NOTE Registered Agent signature required when revisible to) DATE				
Aiter	ILE NOW!!! FEE IS \$150,00 May 1, 2006 Fee Will Be \$550,00 Payable to Florida Department of	Section 1985		9. Election Campaign Financing \$5.00 May Trust Fund Contribution. Added to Fee
10.	OFFICERS AND	() () () () () () () () () ()	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
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NAME	DINKINS, C L JR.		NAME STORE ADDRESS	02/13/00-69038-023 150.00
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 direction 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 1 if changed, or on an attachment water an address, with all other file empowered.

SIGNATURE:

2-1-06
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732-446