

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90420 026 ***150.00

DOCUMENT # P99000012694

1. Entity Name
DAVID STRASSER ANTIQUES, INC.



Principal Place of Business
**3631 SOUTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33340-5**

Mailing Address
**3631 SOUTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33340-5**

40060000



2. Principal Place of Business

3. Mailing Address

3515 TACONIC DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04102006

Chg-P

CR2E034 (11/05)

City & State

City & State

West Palm Bch FL

4. FEI Number

65-0891204

Applied For

Not Applicable

Zip

Country

Zip

Country

33406

Palm Bch

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**STRASSER, DAVID
3631 SOUTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33340-5**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

3515 TACONIC DR

City

W PALM Bch

FL

Zip Code

33406

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
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
STRASSER, DAVID
3631 SOUTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33405**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
STRASSER, DAVID
3631 SOUTH DIXIE HIGHWAY
WEST PALM BEACH, FL 33405**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**3515 TACONIC DR
W PALM Bch FL 33406**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**3515 TACONIC DR
W PALM Bch FL 33406**

☒ Change ☐ Addition

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☐ Change ☐ Addition

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: *David Strasser*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-06 561 642-6040
Date Daytime Phone #

ATTACHMENT
40060051
#P99000012694

-OR-

Change business
address to my
home address:

3515 TACONIC DR.
WLB, FL 33406