

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000063157

FILED  
Apr 18, 2006  
Secretary of State

Entity Name: DOWNTOWN TRANSMISSIONS, INC.

**Current Principal Place of Business:**

1543 S. STATE RD 7  
FORT LAUDERDALE, FL 33317 US

**New Principal Place of Business:**

**Current Mailing Address:**

1543 S. STATE RD 7  
FORT LAUDERDALE, FL 33317

**New Mailing Address:**

FEI Number: 65-0933643      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KEMPES, LINDA L  
6045 LACE WOOD CIRCLE  
LANTANA, FL 33462 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KEMPES, ROSS J PRES  
Address: 2635 TAYLOR STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: TD ( ) Delete  
Name: KEMPES, SUSAN TREAS  
Address: 2635 TAYLOR STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: VP D ( ) Delete  
Name: BIGGS, STEPHAN D VP  
Address: 8220 SW 7TH CT  
City-St-Zip: N. LAUDERDALE, FL 33068 US

Title: S D ( ) Delete  
Name: BIGGS, SUE ANN SEC  
Address: 8220 SW 7TH CT  
City-St-Zip: N. LAUDERDALE, FL 33068 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUE ANN BIGGS

S D

04/18/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date