

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 08, 2004 8:00 am
Secretary of State

07-08-2004 90092 019 ***150.00

DOCUMENT # P99000074206

1. Entity Name
A. & D. BECCA, INC.



Principal Place of Business
**11419 F WEST PALMETTO PLA RD.
BOCA RATON, FL 33496**

Mailing Address
**19231 CLOISTER LAKE LANE
BOCA RATON, FL 33498**

34060282



07022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0942786	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**FEINSTEIN, DAVID
19231 CLOISTER LAKE LANE
BOCA RATON, FL 33498**

**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) DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FEINSTEIN, DAVID
STREET ADDRESS	19231 CLOISTER LAKE LANE
CITY-ST-ZIP	BOCA RATON, FL 33498
TITLE	D
NAME	FEINSTEIN, ANN GAIL
STREET ADDRESS	19231 CLOISTER LAKE LANE
CITY-ST-ZIP	BOCA RATON, FL 33498
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

7/2/04
Date

561 451 3594
Daytime Phone #

Attachment

54060282

July 2, 2004

Division of Corporations
P O Box 6198
Tallahassee, FL 32314-6198

Re: Document #P99000074206
A & D Becca, Inc.

To Whom It May Concern:

We received a postcard in the mail yesterday entitled "notice of intent to dissolve" with instructions to mail back an annual report form and check before Sept 8, 2004. After downloading the preprinted form from your website, we see there is a \$550 fee due to the fact that this is being filed after May 1, 2004.

Please note that we never received in the mail a notice to file before yesterday.

Therefore we are enclosing our check for \$150.00, the normal assessed fee along with our completed report form. We have never filed late in previous years and certainly would not be in this situation if we had received prior notice.

We ask for your understanding and acceptance of this payment. We would appreciate your acknowledgement of this request.

Thank you,



David Feinstein
President

Encl.