2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000107327

LAW OFFICES OF ALLAN M. LERNER, P.A.



FILED Jul 20, 2006 08:00 AM Secretary of State

Principal Place of Business

2888 E. OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33306 Mailing Address

2888 E. OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33306



07032006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0976022 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

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6. Name and Address of Current Registered Agent

LERNER, ALLAN M 2888 E. OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33306

SIGNATURE:

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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. 7/18/36							
	Зурядите турно от римана зато у подчасный апера аполак и	tadnitoti wjiwo rometritoto)) DATE				
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Flootion Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10.	OFFICERS AND DIREC	TORS	er politikare	respondent in the	elektricki melecija i	min sedeburga 🕟	s San Esperant in 19
MAME STREET ADDRESS CITY-ST-ZIP	P LERNER, ALLAN M 2888 EAST OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33306						
THE HAME STREET AUTHESS CIFY+ST+ZIP					00000 07/20/06	0571532 -80014-00:	5 150.00
HILE NAME STHEET ADDRESS CITY-ST ZIP					NOT WR		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPA	CE	
TITLE NAME STREET ADDRESS CITY- ST- ZIP							
TITLE NAME STREET ADDRESS CITY+ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes 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.							

NAME OF SIGNING OFFICER OR DIRECTOR