2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000110701

1. Entity Name
DUNCAN & NELSON, INC.

Principal Place of Business	Mailing Address
290 S.W. 12 AVE DEERFIELD BEACH, FL 33442	290 S.W. 12 AVE DEERFIELD BEACH, FL 33442

DO NOT WRITE IN THIS SPACE

02272006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0969219

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BEAVER PROPERTIES INC
290 SW 12 AVE
DEERFIELD BEACH, FL 33442

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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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

000000481243
04/11/06-80024-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SABGA, JOSEPH
STREET ADDRESS	290 SW 12 AVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	SD
NAME	SABGA, EMILE
STREET ADDRESS	290 SW 12 AVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	TD
NAME	SABGA, GEORGE
STREET ADDRESS	290 SW 12 AVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	V
NAME	SABGA, PETER
STREET ADDRESS	290 SW 12 AVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
TITLE	V
NAME	SABGA, STEVEN P
STREET ADDRESS	290 SW 12 AVE
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Peter Sabga 03/24/2006 (954) 425-0295
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #