

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S16011

FILED
Apr 06, 2006
Secretary of State

Entity Name: ROBINSON & COMPANY, INC.

Current Principal Place of Business:

17645 NW 27TH AVE
MIAMI, FL 33056 US

New Principal Place of Business:

17800 NW 27TH AVE
MIAMI, FL 33056 US

Current Mailing Address:

17645 NW 27TH AVE
MIAMI, FL 33056 US

New Mailing Address:

17800 NW 27TH AVE
MIAMI, FL 33056 US

FEI Number: 65-0233814

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, COLIN
17645 NW 27TH AVE
MIAMI, FL 33056 US

Name and Address of New Registered Agent:

ROBINSON, COLIN
17800 NW 27TH AVE
MIAMI, FL 33056 US

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:

04/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBINSON, COLIN O.,
Address: 20129 NW 34 AVE
City-St-Zip: OPA LOCKA, FL

Title: V () Delete
Name: HOSSACK, CHRISTOPHER
Address: 20129 NW 34TH AVE
City-St-Zip: OPA LOCKA, FL

Title: D (X) Delete
Name: ALLEN, JULIET
Address: 10001 PERIWINKLE STREET
City-St-Zip: MIRAMAR, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROBINSON, COLIN O.,
Address: 17800 NW 27TH AVE
City-St-Zip: OPA LOCKA, FL 33056

Title: V (X) Change () Addition
Name: ALLEN, JULIET
Address: 17800 NW 27TH AVE
City-St-Zip: OPA LOCKA, FL 33056

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: COLIN ROBINSON

P

04/06/2006

Electronic Signature of Signing Officer or Director

Date