


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2006 8:00 am
Secretary of State

03-10-2006 90010 031 ***150.00

DOCUMENT # S28932 1. Entity Name PRINCESS MANAGEMENT & ASSOCIATES, INC.					
Principal Place of Business 407 LINCOLN RD SUITE 4-L MIAMI BEACH, FL 33139			Mailing Address 407 LINCOLN RD SUITE 4-L MIAMI BEACH, FL 33139		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0347383	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent MALEK, ROCHELLE 407 LINCOLN RD SUITE 4-L MIAMI BEACH, FL 33139				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST MALEK, ROCHELLE 407 LINCOLN RD STE 4L MIAMI BEACH, FL 33139	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MALEK, ROCHELLE 407 LINCOLN RD STE 4L MIAMI BEACH, FL 33139	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
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 offices like empowered.			SIGNATURE <i>Rochelle Malek</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		
Date <i>March 1, 2006</i> Date			Daytime Phone # <i>305-538-4431</i> Daytime Phone #		



40028270

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 24, 2006

PRINCESS MANAGEMENT & ASSOCIATES, INC.
407 LINCOLN RD
SUITE 4-L
MIAMI BEACH, FL 33139

SUBJECT: PRINCESS MANAGEMENT & ASSOCIATES, INC.
Ref. Number: S28932

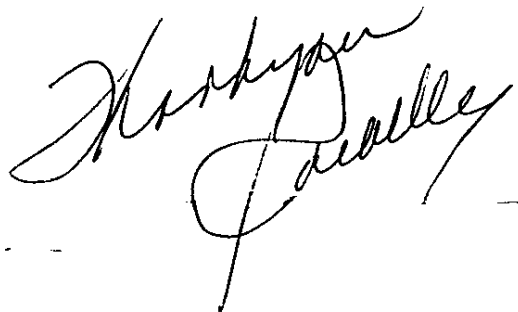
We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/reinstatement application form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Katrina Sutphin

Letter Number: 106A00013316

A handwritten signature in cursive script, appearing to read "Katrina Sutphin".