


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # V43648	
1. Entity Name BARBIERI & SCRENCI, P.A.	

Principal Place of Business 3200 NORTH MILITARY TRAIL SUITE 200 BOCA RATON, FL 33431 US	Mailing Address 3200 NORTH MILITARY TRAIL SUITE 200 BOCA RATON, FL 33431 US
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DO NOT WRITE IN THIS SPACE

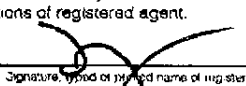


01112008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0338928	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 BARBIERI, FRANK A. JR 3200 NORTH MILITARY TRAIL SUITE 200 BOCA RATON, FL 33431
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**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 	FRANK A. BARBIERI, JR.
<small>Signature, typed or printed name of registered agent and title if applicable</small>	<small>NOTE: Registered Agent Signature required when reinstating. DATE</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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARBIERI, FRANK A 3200 N MILITARY TRAIL SUITE 200 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVTS SCRENCI, STEPHEN W. 3200 NORTH MILITARY TRAIL - SUITE 200 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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04/22/06-80066-020 150.00

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IN THIS SPACE**

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.	
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SIGNATURE: 	FRANK A. BARBIERI, JR.	561-997-5700
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>