

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 21, 2006 8:00 am**  
**Secretary of State**

02-21-2006 90023 003 \*\*\*150.00

**DOCUMENT # V66314**

1. Entity Name

CHAR-MIN CORPORATION



Principal Place of Business

10 YACHT CLUB PLACE  
TEQUESTA FL 33469  
US

Mailing Address

10 YACHT CLUB PLACE  
TEQUESTA FL 33469  
US



2. Principal Place of Business

113 Coconut Key Ct  
Suite, Apt. #, etc.

3. Mailing Address

113 Coconut Key Court  
Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

Palm Beach Gardens, FL

Zip  
33418

Country

Palm Beach

City & State

Palm Beach Gardens, FL

Zip  
33418

Country

Palm Beach

4. FEI Number

65-0376896

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

GORDON, JOANNE  
10 YACHT CLUB PLACE  
TEQUESTA FL 33469

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

Joanne Gordon

(Signature, typed or photostatic copy of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reconstituting)

2/10/06

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	GORDON, JOANNE	
STREET ADDRESS	10 YACHT CLUB PLACE	
CITY-ST-ZIP	TEQUESTA FL 33469	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOANNE Gordon	
STREET ADDRESS	113 Coconut Key Court	
CITY-ST-ZIP	Palm Beach Gardens, FL 33418	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 Section 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:

JOANNE Gordon

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

2/10/06

(561) 627-4856

Daytime Phone #