

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V69162

FILED
Mar 21, 2006
Secretary of State

Entity Name: BARTEL OF PALM BEACH, INC.

Current Principal Place of Business:

DBA RSVP PALM BEACH
277 ROYAL POINCIANA WAY
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

277 ROYAL POINCIANA WAY
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 65-0352030

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POSTELL, BARBARA T
277 ROYAL POINCIANA WAY
PALM BCH, FL 33480 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: POSTELL, BARBARA T.,
Address: 277 ROYAL POINCIANA WAY
City-St-Zip: PALM BEACH, FL

Title: S (X) Delete
Name: WIENER, MARK
Address: 5305 SUNNS BLVD.
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POSTELL, BARBARA T.,
Address: 277 ROYAL POINCIANA WAY
City-St-Zip: PALM BEACH, FL

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: BARBARA T POSTELL

P

03/21/2006

Electronic Signature of Signing Officer or Director

Date