

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90445 045 ***150.00

DOCUMENT # 344938 1. Entity Name FUN TIME INTERNATIONAL, INC.					
Principal Place of Business 2990 SW 28TH LANE PUBLIC STORAGE B-172 MIAMI FL 33133 US			Mailing Address C/O GARWOOD P.O. BOX 330490 MIAMI FL 33233 US		
2. Principal Place of Business 5905-07 Pierce St. Suite, Apt. #, etc. Apt # 3 City & State Hollywood FL.		3. Mailing Address Suite, Apt. #, etc. City & State Zip 33021			
Country U.S.A		Country 		4. FEI Number 59-2453165	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent GARWOOD, DONALD 2990 SW 28TH LANE PUBLIC STORAGE B-172 MIAMI FL 33133			7. Name and Address of New Registered Agent Name GARWOOD, DONALD Street Address (P.O. Box Number is Not Acceptable) 5905-07 PIERCE ST Apt. 3 City Hollywood FL		
Zip Code 33021			Zip Code 33021		
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 <u><i>Donald C. Garwood</i></u> DATE <u>4/18/06</u> Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PLETT, DONALD C 1046 SO. FORT HARRISON AVE. #2 CLEARWATER FL 33756		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARWOOD, JANET 410 NORTH MILL STREET / P.O. BOX 3889 ASPEN CO 81612		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: <u><i>Janet Garwood</i></u>			4/18/06 970-925-7018 x2		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		