## **2006 FOR PROFIT CORPORATION**

## **FILED**

ANNUAL REPORT				Apr. 27, 2006 08:00 A		
DOCUMENT # P0300060825  1. Entity Name STUGATZ, INC.				_	Secr	etary of State
1259 EAST LAS OLAS BLVD. 1		iailing Address 1259 EAST LAS OLAS BLVD. FORT LAUDERDALE, FL 33301				
D	O NOT WRITE	CE	04222006  4. FE! Number 68-05622  5. Certificate of	No Chg-P	CR2E034 (11/05)  Applied For Not Applicable  \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  MORAITIS, ROBERT J ESQ.  1310 SOUTHEAST THIRD AVENUE  FORT LAUDERDALE, FL 33316					NOT WR HIS SPA	
the obligati	named entity submits this statement for the ions of registered agent.  Signature, typod or printed name of registered agent and to		ed office or register		in the State of Florida	a. I am familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing\$5.		.00 May Be led to Fees		
TO.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIF PSTD LANZANA, FRANK J 1259 EAST LAS OLAS BLVD. FORT LAUDERDALE, FL 33301	RECTORS			U3000053 35/09/06-80	7165 008-005 150.00
NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP			anne v m	" ~v vn	NOT WE	* ¥ hv m *
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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 of 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 cytrustee 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:

STREET ADDRESS CITY-ST-ZIP

THRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frank Lanzana, Pres. 4/24/06 (954) 525-6996

Date Daytime Phone #