2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P99000058735

COST SAVING AND REDUCTION SPECIALISTS, INC.



Mailing Address

2671 SW PORT ST. LUCIE BLVD. PORT ST. LUCIE, FL 34953

Principal Place of Business

2671 SW PORT ST. LUCIE BLVD. PORT ST. LUCIE, FL 34953

FILED Apr 05, 2006 08:00 AM Secretary of State



01092006 DO NOT WRITE IN THIS SPACE

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0940017

Applied Not App

5. Certificate of Status Desired

\$8.75 Addition Fee Required

6. Name and Address of Current Registered Agent

FEDERGREEN, SUSAN

STREET ADDRESS CITY-ST-ZIP TIDLE NAME STREET ADDRESS CHY-ST- OP

2328 GINGER TERRACE JENSEN BEACH, FL 34957		IN THIS SPACE		
e purpose of changing	g its registered of	fice or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and
tite if applicable.	NOTE: Registered Ager	t elgneture	required when reinstating)	DATE
			\$5.00 May Be Added to Fees	
RECTORS			DO	NOT WRITE THIS SPACE
	ste if applicable. 9. Election Car	9. Election Campaign Financing Trust Fund Contribution.	9. Election Campaign Financing Trust Fund Contribution.	IN The purpose of changing its registered office or registered agent, or but the literal separation of the purpose of changing its registered Agent signature regulated when reinstating) 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 134,

thereby 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 or this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or 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 Brownian and the same legal effect as if made under eath; that I am an officer or 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 Brownian that the information of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Brownian that the information of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Brownian that the information of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Brownian that the information of the receiver of the same that the information of the receiver of the same that the information of the receiver of the same that the information of the receiver of the same that the information of the receiver of the same that the information of the receiver of the same that the information of the receiver of the same that the information of the same that the inform