## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000004660

SAMMAMISH, WA 98074

City-St-Zip:

FILED Jun 30, 2006 Secretary of State

Entity Nar	me: PASCAL	COMPANY, INC.				
Current P	rincipal Place	of Business:	New Princ	ipal Place of	Business:	
	NORTHUP W E, WA 980091			NORTHUP W E, WA 98004	/AY	
Current M	lailing Addres	ss:	New Maili	ng Address:		
P.O. BOX BELLEVUE	1478 E, WA 980091	478				
FEI Number:	: 91-0357700	FEI Number Applied For ( )	FEI Number Not Appli	icable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:	
22922 OXF	QUILLO, FRED FORD PLACE TON, FL 3343	APT A	6937 ESCC	UILLO, FREE BAR COUR' ON, FL 3343	T	
	named entity e of Florida.	submits this statement for the p	urpose of changing it	s registered	office or registered agent, or bo	th,
SIGNATUR	RE:				06/30/2006	
	Electron	nic Signature of Registered Age	ent		Date	_
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	t receive the prior notice	е.		
	S AND DIREC	- , ,	ADDITION	S/CHANGES	TO OFFICERS AND DIRECT	ORS:
Title: Name: Address: City-St-Zip:	CP ( PASCHALL, BE 7720-131ST N. KIRKLAND, WA	E.	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	V ( WATTON, DAV 11420 N.E. 112 KIRKLAND, WA	2TH STREET	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( SIWINSKI, JAN 14310 N.E. 12 <sup>T</sup> BELLEVUE, W	ΓH PL.	Title: Name: Address: City-St-Zip:	S (X BURMAN, STE 2610 N 34TH F MT VERNON, Y	PLACE	
Title: Name: Address:	PELLICANO, J	) Delete OE L. NORTHEAST	Title: Name: Address:	(	) Change ()Addition	

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.

City-St-Zip:

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