## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 20, 2006 08:00 AM Secretary of State

ANNUAL REPORT				Secretary of State		
1. Entity Nam	MENT # 556278 NCESSIONS, INC.			Secretary of State		
Principal Place of Business P 0 80X 300107		Mailing Address P 0 80X 300107			!	
FERN PARK,	FL 32730	FERN PARK, FL 32730				
r	O NOT WRITE	E INI THIS SP	ACE	03302008	<u> </u>	
1	O NOT WINTE		MOL.	4. FEI Numb 59-178		
				5. Certificate	e of Status Desired	
	6. Name and Address of Curren	t Registered Agent	_			
SOPER, H				DO	NOT WRITE	
	RK, FL 32730			IN .	THIS SPACE	
the obligat	Signature, based or printed neme of registered ele- E NOWILL FEE IS \$150.00 By 1, 2006 Fee Will be \$550	nt and title if applicable prote: Reg	pistered Agent signature requirer		oth, in the State of Florida. I am familiar with, and eco	
10.	OFFICERS AN			···	<u></u>	
TITLE MAME STREET ADDRESS CITY-ST-ZIP	SOP SOPER, HORT A					
TITLE NAME STREET ADDRESS CHY-ST-ZIP					U00000521780 05/03/06-80004-004 150.00	
TITLE NAME STREE) ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
Title Name Street address City-St-Zip				IN THIS SPACE		
name Name Syreet address City-St-Zip					:	
DILE NAME		. 1				

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 or supplemental report if true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee employered 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 adding by with a graphs like empowered.

SIGNATURE:

STREET ADDRESS C(TY-ST-ZIP

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/06 407-339-6221