2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 577766

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4551 29 AVE NORTH ST PETERSBURG, FL 33713 US Current Mailing Address: New Mailing Address: New Mailing Address: New Mailing Address: S552 84TH AVE NO PINELLAS PK, FL 33781 US FEI Number: 59-1845270 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (Name and Address of Current Registered Agent: PARRI, RAYMOND L. 1217 PONCE DE LEON BLVD. CLEARWATER, FL 33516 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or)
Current Mailing Address: New Mailing Address: ST PETERSBURG, FL 33713 US New Mailing Address: S552 84TH AVE NO PINELLAS PK, FL 33781 US FEI Number: 59-1845270 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (Name and Address of Current Registered Agent: PARRI, RAYMOND L. 1217 PONCE DE LEON BLVD. CLEARWATER, FL 33516 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or)
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1217 PONCE DE LEON BLVD. CLEARWATER, FL 33516 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or	
in the State of Florida. SIGNATURE:	both,
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS:
Title: PD () Delete Title: () Change () Addition Name: HOFFMANN, DOUGLAS L., Name: Address: 4551 29TH AVE. N. Address: City-St-Zip: ST. PETERSBURG, FL 33713 City-St-Zip:	
Title: SD () Delete Title: () Change () Addition Name: HOFFMANN, CAROL V., Name:	

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.

SIGNATURE: DOUGLAS L HOFFMANN PD 04/27/2006