2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 651839

Entity Name: X-RAY MARKETING ASSOCIATES, INC.

FILED May 12, 2006 Secretary of State

Littly Name: X-RAT MARKETING ASSOCIATES, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	KEVIEW COL LE, IL 604466				
Current Mailing Address:			New Mailir	ng Address:	
1205 W LAKEVIEW COURT ROMEOVILLE, IL 604466501 US					
FEI Number:	36-3085953	FEI Number Applied For ()	El Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	i, ROBERT AL MARCO W. LAND, FL 341				
The above in the State		submits this statement for the purp	ose of changing it	s registered office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent Date					
Election Cam	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title:	SEEGER, SANI 961 INDUSTRY KENNER, LA 7	RD.	Title: Name: Address: City-St-Zip: Title:	S (X) Change () Addition WALKER, TOM 11430 WATTERSON COURT, SUITE 500 LOUISVILLE, KY 40299 US P (X) Change () Addition	
Name: Address: City-St-Zip:	ALVAREZ, TON 414 CULEBRA SAN ANTONIO,	RD.	Name: Address: City-St-Zip:	WALSH, DAN 5314 MILL STREET ORIENT, OH 43146 US	
Title: Name: Address: City-St-Zip:	T () WALKER, THOI 1705 S. 5TH ST LOUISVILLE, K	REET	Title: Name: Address: City-St-Zip:	T (X) Change () Addition CARRIGAN, WALTER 21277 BRIDGE STREET SOUTHFIELD, MI 48034 US	
Title: Name: Address: City-St-Zip:	VP () WALSH, DAN 5314 MILL STR ORIENT, OH 43		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition JOHNSON, JIM 517 HICKORY HILLS BOULEVARD WHITES CREEK, TN 37189 US	
Title: Name: Address: City-St-Zip:	JOHNSON, JAN 517 HICKORY I		Title: Name: Address: City-St-Zip:	D (X) Change () Addition GARRARD, JOHN 229 BOBRICK DRIVE JACKSON, TN 38301 US	
Title: Name: Address: City-St-Zip:	FORTENBERR'	USTRIAL DRIVE	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: MARCO COLADIPIETRO GM 05/12/2006