

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90177 019 ***150.00

DOCUMENT # 835433

1. Entity Name
FLORIDIAN CARD PRODUCTS, INC.



Principal Place of Business
**9524 N TRASK ST
TAMPA, FL 33624 US**

Mailing Address
**9524 N TRASK ST
TAMPA, FL 33624 US**

40062400



04022006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1605980	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**BLANK, STANLEY D
9524 N TRASK ST
TAMPA, FL 33624**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BLANK, STANLEY
STREET ADDRESS	9524 N. TRASK ST
CITY-ST-ZIP	TAMPA, FL 33624

TITLE	D
NAME	FRIEDMAN, PAUL <i>BLANK, ANN</i>
STREET ADDRESS	9524 N TRASK ST
CITY-ST-ZIP	TAMPA, FL 33624

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stan Blank **STAN BLANK**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-06
Date

813-961-7900
Daytime Phone #



ATTACHMENT
40062408
Division of Corporations

2006 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.	
Document Number	835433
Business Entity Name	FLORIDIAN CARD PRODUCTS, INC.
Original File Date	11/19/1975

FEI Number 59-1605980
Principal Address 9524 N TRASK ST
TAMPA, FL 33624 US
Mailing Address 9524 N TRASK ST
TAMPA, FL 33624 US
Registered Agent BLANK, STANLEY D
9524 N TRASK ST
TAMPA, FL 33624 US

Officer/Director Name And Address

PD
BLANK, STANLEY
9524 N. TRASK ST
TAMPA, FL 33624

D
FRIEDMAN, PAUL
9524 N TRASK ST
TAMPA, FL 33624

Needs TO BE
DELETED

If all of the above
information is correct and
you do not wish to make any
changes, please select:

No Changes

If you need to make changes
to the above information,
please select:

Make Changes

Sunbiz Home Page

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