

FILED
May 30, 2006 8:00 am
Secretary of State

05-30-2006 90182 001 ***300.00

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # F0400005855

1. Entity Name
APRIL ROSE FINGERS AND TOES, INC.



Principal Place of Business
~~127 Garfield~~
FORT WALTON BEACH, FL 32547

Mailing Address
127 Garfield
FORT WALTON BEACH, FL 32547

Annual report notice
66017573



05192006 Chg-P CR2E034 (11/05)

2. Principal Place of Business

127 Garfield
Suite, Apt. #, etc.

3. Mailing Address

127 Garfield
Suite, Apt. #, etc.

City & State

Ft. Walton Beach FL
Zip 32547 Country

City & State

Ft. Walton Beach FL
Zip Country

4. FEI Number

31-1587988

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MORRIS, APRIL R
424 GEROLD
FORT WALTON BEACH, FL 32547

Incorrect
Name &
Address

7. Name and Address of New Registered Agent

Name APRIL COHEN
Street Address (P.O. Box Number is Not Acceptable)
127 Garfield
City Ft. Walton Beach
FL Zip Code 32547

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 *April Cohen*

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

(NOTE: Registered Agent signature required when reinstating)

UNAVAILABLE FOR NON-RECEIPT OF PRIOR ANNUAL REPORT NOTICE
DATE 5/20/06

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2006

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	MORRIS, APRIL R	
STREET ADDRESS	424 GEROLD	
CITY - ST - ZIP	FORT WALTON BEACH, FL 32547	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PRESIDENT APRIL COHEN	
STREET ADDRESS	127 Garfield	
CITY - ST - ZIP	Ft. Walton Beach Florida 32547	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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: *April Cohen*
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(614) 560-9028
Date 5/20/06
Date Time Phone #

May 19 2006 6:08PM

BONNIE MORRIS

1-614-863-1812

P.3

ATTACHMENT

66017573

#FO 4000025855

BONNIE E. MORRIS, CPA, INC.

5621 Farms Dr.

Columbus, Ohio 43213

Phone (614) 863-5730

Fax (614) 863-1812

bonnie@insight.rr.com

May 19, 2006

Department of Corporations
P.O.Box 1500
Tallahassee, Fl 32302-1500

Enclosed please find the 2006 For Profit Corporation Annual Report. This letter will serve as written request for a waiver of the \$ 400.00 late fee. This corporation did not receive the prior annual report notice. In accordance with annual report filings, a waiver is allowed when there is non-receipt of a prior annual report notice. We appreciate your kind attention to this matter. We have enclosed the annual filing fee of \$ 150.00.

Sincerely,


Bonnie Morris, CPA

Slp:BEM