2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 20, 2006 08:00 AM Secretary of State

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1. Entity Name

ST. PETERSBURG MAP & BLUE PRINT CO.



Principal Place of Business

3652 18TH AVE

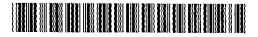
SAINT PETERSBURG, FL 33713 US

Mailing Address

C/O H. TODD ROBBINS

PO BOX 425

ST. PETERSBURG, FL 33731-0425 US



DO NOT WRITE IN THIS SPACE

01062006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2130546

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

H. TODD ROBBINS 3652 18TH AVE N SAINT PETERSBURG, FL 33713

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SIGNATURE									
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees							
10.	OFFICERS AND DIREC	CTORS	1		,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBBINS, H. TODD 3652 18TH AVE N SAINT PETERSBURG, FL 33713				•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ROBBINS, HARRY JR. 6443 30TH AVE ST PETERSBURG, FL				1999993344 01724785 88048-028 150.0 0				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ROBBINS, DONNA K. 3652 18TH AVE N SAINT PETERSBURG, FL 33713			DO NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					·				
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied with the information indicated on this report of supplied with the information indicated on the supplied with the supplie									

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

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:

SIGNATURE:

SIGNATURE:

SIGNATURE AND THE OR PRINTED WAYS OF SIGNATURE OF DIRECTOR OF THE CORP.