## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED DOCUMENT #F50106 Jan 31, 2006 08:00 AN Secretary of State 1. Entity Name FRAME STATION, INC. Principal Place of Business ..... Mailing Address KEBLER, PAMELA KEBLER, PAMELA 3700 49TH ST NO 3700 49TH ST NO ST PETERSBURG, FL 33710 ST PETERSBURG, FL 33710 01252006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2141602 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KEBLER, PAMELA DO NOT WRITE 5841 41ST AVE. N. ST PETERSBURG, FL 33709 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. (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) UQ0QQ0409213 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 02/0**8**/06-80087-013 150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME KEBLER, GARY L STREET ADDRESS 5841 41ST AVENUE NORTH CITY-ST-ZIP ST PETERSBURG, FL KEBLER, PAMELA K STREET ADDRESS 5841 41ST AVENUE NORTH ST PETERSBURG, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS CITY-ST-ZIP TILLE

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:

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

-26-06

127-522-7100

Daytime Phone #