2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F75005

Entity Name: M & S OF REGENCY, INC.

FILED Jan 30, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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9720 ATLANTIC BLVD. 9720 ATLANTIC BLVD

JACKSONVILLE, FL 322258223 JACKSONVILLE, FL 322258223 US

Current Mailing Address: New Mailing Address:

9720 ATLANTIC BLVD. 9720 ATLANTIC BLVD

JACKSONVILLE, FL 322258223 JACKSONVILLE, FL 322258223 US

FEI Number: 59-2172692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AKEL, EDWARD C. 2301 INDEPENDENT SQ., ONE INDEPENDENT DR. JACKSONVILLE, FL 32202 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: D (X) Change () Addition

 Name:
 SALAMEH, SAMIR E,
 Name:
 SALAMEH, SAMIR E,

 Address:
 9720 ATLANTIC BLVD
 Address:
 9720 ATLANTIC BLVD

 City-St-Zip:
 JACKSONVILLE, FL 00000,
 City-St-Zip:
 JACKSONVILLE, FL 32225 US

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SALAMEH, MUNIR E,
 Name:
 SALAMEH, MUNIR E,

 Address:
 9720 ATLANTIC BLVD
 Address:
 9720 ATLANTIC BLVD

 City-St-Zip:
 JACKSONVILLE, FL 00000,
 City-St-Zip:
 JACKSONVILLE, FL 32225

Title: VP () Delete Title: () Change () Addition

 Name:
 SALAMEH, ELIAS S
 Name:

 Address:
 9720 ATLANTIC BLVD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:

Title: VP () Delete Title: PRES (X) Change () Addition

 Name:
 SALAMEH, SUAD S
 Name:
 SALAMEH, SUAD S

 Address:
 9720 ATLANTIC BLVD
 Address:
 9720 ATLANTIC BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:
 JACKSONVILLE, FL 32225

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: SAUD SALAMEH PRES 01/30/2006