

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

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SECRET  
TALLAHASSEE, FLORIDA

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| <b>DOCUMENT # F94000000563</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                |                                                     |                                                                                                                                                                          |
| 1. Entity Name<br>CENTURY INTERNATIONAL ARMS OF VERMONT, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                |                                                                                                                                      |                                                                                                                                                                          |
| Principal Place of Business<br>430 S. CONGRESS AVENUE SUITE 1<br>DELRAY BEACH, FL 33445 US                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                | Mailing Address<br>430 S. CONGRESS AVENUE SUITE 1<br>DELRAY BEACH, FL 33445 US                                                       |                                                                                                                                                                          |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                | 3. Mailing Address                                                                                                                   |                                                                                                                                                                          |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                | Suite, Apt. #, etc.                                                                                                                  |                                                                                                                                                                          |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                | City & State                                                                                                                         |                                                                                                                                                                          |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Country                                                                                                        | Zip                                                                                                                                  | Country                                                                                                                                                                  |
| 4. FEI Number<br>03-0294946                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                | Applied For<br>Not Applicable                                                                                                        |                                                                                                                                                                          |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                | \$8.75 Additional<br>Fee Required                                                                                                    |                                                                                                                                                                          |
| 6. Name and Address of Current Registered Agent<br><br>SUCHER, MICHAEL<br>430 S CONGRESS AVENUE, SUITE 1<br>DELRAY BEACH, FL 33445                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>FL Zip Code |                                                                                                                                                                          |
| 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 _____ DATE _____<br><small>Signature: Typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when name changed)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                |                                                                                                                                      |                                                                                                                                                                          |
| FILE NOW!!! FEE IS \$180.00<br>After May 1, 2006 Fee will be \$650.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be<br>Added to Fees                   |                                                                                                                                                                          |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                |                                                                                                                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DP<br>SUCHER, MICHAEL<br>430 S. CONGRESS AVE SUITE 1<br>DELRAY BEACH, FL 33445 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | OV<br>SUCHER, PHYLLIS<br>430 S. CONGRESS AVE SUITE 1<br>DELRAY BEACH, FL 33445 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DST<br>SUCHER, BRIAN<br>430 S. CONGRESS AVE SUITE 1<br>DELRAY BEACH, FL 33445 <input type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Delete                                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                     | V Sucher, Anna<br>430 S. Congress Avenue, Suite 1<br>Delray Beach, Florida 33445 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Delete                                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                     | V Sucher, Howard<br>430 S. Congress Avenue, Suite 1<br>Delray Beach, Florida 33445 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Delete                                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                        |
| 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: _____<br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                |                                                                                                                                      |                                                                                                                                                                          |