

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002793

Entity Name: DEMO SPECIALTIES, INC.

FILED
Jan 05, 2006
Secretary of State

Current Principal Place of Business:

C/O BRADLEY N. DAVIS
216 LOUISIANA STREET
LITTLE ROCK, AR 72201 US

New Principal Place of Business:

Current Mailing Address:

% BRADLEY N. DAVIS
PO BOX 2204
LITTLE ROCK, AR 722032204

New Mailing Address:

FEI Number: 71-0755042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: COB () Delete
Name: VRATSINAS, GUS M
Address: 69 PINEHURST CIRCLE
City-St-Zip: LITTLE ROCK, AR 72212

Title: CEO () Delete
Name: ALLEY, SAM K
Address: 54 CHENAL CIRCLE
City-St-Zip: LITTLE ROCK, AR 72212

Title: CFO () Delete
Name: DAVIS, BRADLEY N
Address: 3930 SOUTH LOOKOUT
City-St-Zip: LITTLE ROCK, AR 72205

Title: COO () Delete
Name: BAILEY, ROBERT B
Address: 36 LINDULAKE ROAD
City-St-Zip: CABOT, AR 72023

Title: PRE () Delete
Name: JOHNSON, WILLIAM J
Address: 2160 WOOD FALLS DRIVE
City-St-Zip: CUMMING, GA 30041

Title: PRES () Delete
Name: ALLEY, ESSA K
Address: 31 BRETAGNE CIRCLE
City-St-Zip: LITTLE ROCK, AR 72211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRADLEY N DAVIS

CFO

01/05/2006

Electronic Signature of Signing Officer or Director

_____ Date