

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004697

FILED
Jan 05, 2006
Secretary of State

Entity Name: SPECIALTY GRAPHIC TECHNOLOGIES, INC.

Current Principal Place of Business:

8504 ADAMO DR
UNIT J
TAMPA, FL 33619 US

New Principal Place of Business:

8506 ADAMO DR
STE 100/200
TAMPA, FL 33619 US

Current Mailing Address:

PO BOX 89154
TAMPA, FL 336890402 US

New Mailing Address:

FEI Number: 58-0813042 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STORCH, CARL A
306 9TH AVENUE EAST
PALMETTO, FL 34221 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: PD () Delete
Name: STORCH, CARL A
Address: 306 9TH AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

Title: S () Delete
Name: STORCH, LINDA
Address: 308 MILL POND RD
City-St-Zip: ROSWELL, GA

Title: CD () Delete
Name: STORCH, HURCHEL
Address: 308 MILL POND RD
City-St-Zip: ROSWELL, GA 30076

Title: VD () Delete
Name: WILLIAMS, MARSHALL
Address: 5814 CROOK CREEK
City-St-Zip: NORCROSS, GA 30092

Title: CFO () Delete
Name: STORCH, CARL A
Address: 306 9TH AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

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:

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: CARL STORCH

PD

01/05/2006

Electronic Signature of Signing Officer or Director

Date