

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H40843

Entity Name: M & S AWARDS, INC.

FILED  
Apr 17, 2006  
Secretary of State

## Current Principal Place of Business:

722 SHORE DR E  
OLDSMAR, FL 34677

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 298  
OLDSMAR, FL 34677

## New Mailing Address:

P.O. BOX 298  
OLDSMAR, FL 34677

FEI Number: 59-2503541

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SWAIN, BRUCE  
722 SHORE DR E  
OLDSMAR, FL 34677 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: TD ( ) Delete  
Name: MOREDA, LYDIA,  
Address: 722 SHORE DR. E.  
City-St-Zip: OLDSMAR, FL

Title: DS ( ) Delete  
Name: MOREDA, GLORIA,  
Address: 403 SANDPINE COURT  
City-St-Zip: BRANDON, FL

Title: DV ( ) Delete  
Name: SWAIN, BRUCE,  
Address: 722 SHORE DR. E.  
City-St-Zip: OLDSMAR, FL

Title: DP ( ) Delete  
Name: STEED, LARRY,  
Address: 403 SANDPINE COURT  
City-St-Zip: BRANDON, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVPS (X) Change ( ) Addition  
Name: MOREDA, LYDIA  
Address: 722 SHORE DR. E.  
City-St-Zip: OLDSMAR, FL 34677

Title: D (X) Change ( ) Addition  
Name: MOREDA, GLORIA  
Address: 403 SANDPINE COURT  
City-St-Zip: BRANDON, FL 33511

Title: DP (X) Change ( ) Addition  
Name: SWAIN, BRUCE T  
Address: 722 SHORE DR. E.  
City-St-Zip: OLDSMAR, FL 34677

Title: D (X) Change ( ) Addition  
Name: STEED, LARRY  
Address: 403 SANDPINE COURT  
City-St-Zip: BRANDON, FL 33511

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: BRUCE T. SWAIN

DP

04/17/2006

Electronic Signature of Signing Officer or Director

Date