

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # H84166 1. Entity Name PARK PLACE INDUSTRIALS, INC.	
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Principal Place of Business 29656 U.S. HIGHWAY 19 NORTH SUITE 100 CLEARWATER, FL 33761 US	Mailing Address 29656 U.S. HIGHWAY 19 NORTH SUITE 100 CLEARWATER, FL 33761 US
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01272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2633843	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MINIERI, CARL 29656 U.S. HIGHWAY 19 NORTH SUITE 100 CLEARWATER, FL 33761

**DO NOT WRITE
IN THIS SPACE**

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 _____ Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating)	DATE _____
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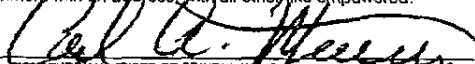
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MINIERI, CARL 29656 US 19 NO, STE 100 CLEARWATER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GENTILE, MICHAEL 29656 US 19 N STE 100 CLEARWATER, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MINIERI, CARL 29656 US 19 N STE 100 CLEARWATER, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

100000536201
05/09/06-80084-007 150.00

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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR CARL A MINIERI Vice Pres.	4-1-06 Date	7277873111 Daytime Phone #
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