


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 31, 2006 8:00 am
Secretary of State

07-31-2006 90007 012 ***150.00

DOCUMENT # K02935 1. Entity Name ULTIMATE PRODUCTS, INC.					
Principal Place of Business 4893 W. WATERS AVE SUITE C TAMPA, FL 33634 US			Mailing Address 4897 W. WATERS AVE SUITE C TAMPA, FL 33634 US		
2. Principal Place of Business <i>966 S. Easy Street</i>			3. Mailing Address <i>966 S. Easy Street</i>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State <i>Sebastian FL</i>			City & State <i>Sebastian FL</i>		
Zip <i>32958</i>		Country <i>US</i>		4. FEI Number 59-2856695	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HARTLEY, MARY REGINA 4897 W. WATERS AVE. SUITE C TAMPA, FL 33634			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <i>966 S. Easy Street</i> City <i>Sebastian</i> FL Zip Code <i>32958</i>		
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 <i>M. Regina Horthy</i> (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST HARTLEY, MARY REGINA 802 EVENINGSIDE COURT TAMPA, FL 33613 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>966 S. Easy Street Sebastian FL 32958</i>	
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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: <i>M. Regina Horthy</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			5/30/2006 772-713-7841 <small>Date Daytime Phone #</small>		

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