2006 FOR PROFIT CORPORATION

FILED Feb 03, 2006 08:00 AM

ANNUAL REPORT					Second-	CC4-4-
1. Entity Nam	MENT # K40747 ARS OF YESTERDAY, INC.				Secreta	ry of State
	re of Business STREET NORTH BURG, FL 33713-1999	Mailing Address 1831 26TH STREET NORTH _ST. PETERSBURG, FL 33713-	1999		23 - 118 33 - 188 123 258113 - 18814 1 88 3 - 1 1814 - 1278 128	BIT BIBSI BIBSI BIBTIBBI 11 7888
DO NOT WRITE IN THIS SPA			CE	01062006 No Chg-P CR2E034 (11/05) 4. FEI Number		
	6. Name and Address of Current R	egistered Agent				
RUDENIS, DAVE 1831 - 26TH ST., N. ST. PETERSBURG, FL 33713					NOT WRITE	_
6. The above	named entity submits this statement for lions of registered agent.	he purpose of changing its register	ed office ar registe	red agent, or bo	oth, in the State of Florida. I am	familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent an	d the Rappicable. (NOTE. Registers	rd Agent signature requires	d when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.				.00 May Be ed to Fees		
10.	OFFICERS AND D	RECTORS			<u> </u>	
name Street address City -53 - 21P	PD RUDENIS, DAVE 1831 28TH ST. N. ST. PETERSBURG, FL			·-··	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RUDENIS, FLORA 1831 26TH ST. N. ST. PETERSBURG, FL				141000041876 02/14/06-80020	61 0-010 150,00
title Hame Street Address City-St-Zip				DO	NOT WRITE	E
TITLE NAME STREET ADDRESS CATY-ST-ZIP				IN '	THIS SPACE	=
NTLE NAME STREET ADDRESS CHY-ST-ZIP						
			5			

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplicated in the end 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 of 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 or an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED ON PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

8/1/06 727-328-1936 Despuis Phone 4