


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 27, 2006 08:00 AM
Secretary of State

DOCUMENT # K41621	
1. Entity Name STUDOR, INCORPORATED	

Principal Place of Business 11256 47TH ST N CLEARWATER, FL 33762 US	Mailing Address 11256 47TH ST N CLEARWATER, FL 33762 US
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DO NOT WRITE IN THIS SPACE



07182006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2929906	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BEUSCHEL, JACK 11256 47TH ST N CLEARWATER, FL 33762
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE 07/27/06-80004-019 150.00
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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.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO CROSS, ROBERT L 455 W. VICTORIA ST COMPTON, CA 90220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BEUSCHEL, JACK 830 LUCAS LANE OLDSMAR, FL 34677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MANNERINO, ERNIE 202 INDUSTRIAL PARK LANE COLLIERVILLE, TN 38017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GORDIN, GARY 202 INDUSTRIAL PARK LANE COLLIERVILLE, TN 38017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: 	Date: 7-18-06	Daytime Phone #
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		