2006 FOR PROFIT CORPORATION **ANNUAL REPORT** DOCUMENT # L86779 1. Entity Name NIGHT AUDITORS OF AMERICA INC. Principal Place of Business Mailing Address 7320 FARINGTON COURT 7320 FARINGTON COURT ORLANDO, FL 32819 US ORLANDO, FL 32819 US DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent WEINLAND, JEFFREY T

typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee will be \$550.00

WEINLAND, MARGARET

ORLANDO, FL 32819

WEINLAND, JEFFREY T

ORLANDO, FL 32819

7320 FARINGTON COURT

7320 FARINGTON COURT

FILED Mar 01, 2006 08:00 Al **Secretary of State**

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of Current Regis	tered Agent		5. Certificate of Status Desired Fee Required		
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talement for the p	ourpose of changing its registe	ered office or register	ed agent, or both, in the State	of Floficia. Tain fam	niliar with, and accept
gistered agent and title i	if applicable, (NOYE: Registe	red Agent signature required	when reinstating)	DATE	
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12. I hereby certify that the information sup-indicated on this report or supplymental of the corporation or the receiver or trus changed, or on an attachment with an a filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if ther like empowered.

SIGNATURE:

7320 FARINGTON COURT ORLANDO, FL 32819

PSD

8. The above nar

SIGNATURE.

10.

TITLE

NAME

NAME

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

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CITY-ST-ZIP

the obligations

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR