2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 06, 2006 08:00 AM DOCUMENT # M26468 **Secretary of State** PIRONE TYPE & GRAPHICS, INC. Mailing Address Principal Place of Business 3850 SW 136 AVENUE 3850 S.W. 136 AVE. MIRAMAR, FL 33027 MIRAMAR, FL 33027 CR2E034 (11/05) No Chg-P 03042006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicat 59-2691323 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE PIRONE, CARL 3850 SW 136 AVENUE MIRAMAR, FL 33027 IN THIS SPACE 6. 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 access the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. 7171 F NAME PIRONE, CARL 1100000458338 STREET ADDRESS 3850 SW 138 AVENUE 03/17/06-80041-008 150.00 CITY-ST-ZIP MIRAMAR, FL TITLE PIRONE, PATRICIA NAME 3850 SW 136 AVENUE STREET ADDRESS CITY-ST-ZIP MIRAMAR, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, Florida Statutes 1 further certify that the informatic 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 directly of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 1 changed, or on an attachment with an aethors, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

CARL PIRONE

3/3/96 954-436-0226

FILED