

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 18, 2006 8:00 am**  
**Secretary of State**

01-18-2006 90027 016 \*\*\*158.75

**60003305**



01042006 Chg-P CR2E034 (11/05)

4. FEI Number  
**74-2973535**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**CORPORATE CREATIONS NETWORK, INC**  
**11360 PROSPERITY FARMS RD**  
**221E**  
**PALM BEACH GARDENS, FL 33410**

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required 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. ☐ **\$5.00 May Be Added to Fees**

## 10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	ZABERER, RONALD	
STREET ADDRESS	14926 N. FLORIDA AVE	
CITY-ST-ZIP	TAMPA, FL 33612	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	WATERS, CHRIS	
STREET ADDRESS	14926 N. FLORIDA AVE	
CITY-ST-ZIP	TAMPA, FL 33613	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ZABERER, RONALD	
STREET ADDRESS	14926 N. FLORIDA AVE	
CITY-ST-ZIP	TAMPA, FL 33613	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WATERS, CHRIS	
STREET ADDRESS	14926 N. FLORIDA AVE	
CITY-ST-ZIP	TAMPA, FL 33613	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President, Treas, + Director	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Larry Katz	
STREET ADDRESS	636 Broadway, Suite 310	
CITY-ST-ZIP	San Diego, CA 92101	
TITLE	Vice President + Sec.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Chris Waters	
STREET ADDRESS	636 Broadway, Suite 310	
CITY-ST-ZIP	San Diego, CA 92101	
TITLE	Director	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rinelle Lahlou	
STREET ADDRESS	636 Broadway, Suite 310	
CITY-ST-ZIP	San Diego, CA 92101	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Larry Katz, President 01-18-2006 601-223-3522