

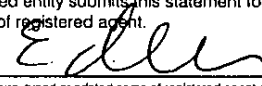
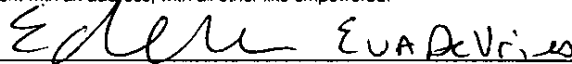


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 23, 2006 8:00 am**  
**Secretary of State**

02-23-2006 90013 017 \*\*\*150.00

<b>DOCUMENT # P00000116787</b> 1. Entity Name <b>PHOENIX DOCUMENT SERVICE, INC.</b>																																																																							
Principal Place of Business <b>12600 SEMINOLE BOULEVARD SUITE A3 LARGO, FL 33778</b>			Mailing Address <b>12600 SEMINOLE BOULEVARD SUITE A3 LARGO, FL 33778</b>																																																																				
2. Principal Place of Business <b>13191 Starkey Rd</b> Suite, Apt. #, etc. <b>6</b>		3. Mailing Address <b>13191 Starkey Rd</b> Suite, Apt. #, etc. <b>6</b>																																																																					
City & State <b>Largo, FL</b>		City & State <b>Largo, FL</b>		4. FEI Number <b>59-3693084</b>																																																																			
Zip <b>33773</b> Country <b>USA</b>		Zip <b>33773</b> Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required																																																																			
6. Name and Address of Current Registered Agent <b>DEVRIES, EVA 12600 SEMINOLE BOULEVARD SUITE A3 LARGO, FL 33778</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>13191 Starkey Rd, Suite 6</b> City <b>Largo</b> <b>FL</b> Zip Code <b>33773</b>																																																																			
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)																																																																							
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																																				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;">P DEVRIES, PETER JOHN</td> <td style="width: 30%; padding: 2px;"><input type="checkbox"/> Delete</td> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;"><b>13191 Starkey Rd, Suite 6</b></td> <td style="width: 30%; padding: 2px;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">12600 SEMINOLE BOULEVARD STE A3</td> <td></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"><b>Largo, FL 33773</b></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">LARGO, FL 33778</td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	P DEVRIES, PETER JOHN	<input type="checkbox"/> Delete	TITLE	<b>13191 Starkey Rd, Suite 6</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	12600 SEMINOLE BOULEVARD STE A3		NAME	<b>Largo, FL 33773</b>		STREET ADDRESS	LARGO, FL 33778		STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP		
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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:  <b>EVA DEVRIES</b>																																																																							
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																							
Date <b>2-16-06</b> Daytime Phone # <b>7275812552</b>																																																																							