2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2006 8:00 am Secretary of State

DOCUMENT # P0100008096 1. Entity Name APPRAZ, INC.				05-02-2006 90	0184 010 ***158.	75		
Principal Plac 2672 1ST AV ST. PETERSE		Mailing Address 5601 8TH AVENUE N ST.PETERSBURG, FL 33710	0	,	4007901		(1) 36 1 (1 126 1	
2. Principal Place of Business 3 4218 (9 ulf blvd #103 Suite, Apt. #, etc. 3		3. Mailing Address Gulf Blvcl Suite, Apt. #, etc.		04272006	04272006 Chg-P CR2E034 (11/05)			
Sity & State LNDIAN Shores FL		City & State LND1AN Shores FL		4. FEI Numbi		A	oplied For	
Zip	Codntry	 	puntry clas		of Status Desired	\$8.75 Ad		
33785 Pinella 5 3378 6. Name and Address of Current Registered Agent			nellas		Address of New R	Fee Require	id	
MCATEE, CAROL			Name	Name				
5401 CENTRAL AVENUE ST. PETERSBURG, FL 33710-7114			Street Add	Street Address (P.O. Box Number is Not Acceptable)				
			City			⊏1 Zip Coo	lo.	
The above named entity submits this statement for the ourgose of changing its registe.			_ L _ ´	egistered agent, or ho	th in the State of Ele	FL		
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								
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.								
				\$5.00 May Be Added to Fees				
After M	ay 1, 2006 Fee will be \$550.0 OFFICERS AND D	Trust Fund Contribution	on	Added to Fees ADDITIONS		ICERS AND DIRECTOR		
After M	OFFICERS AND D BURKETT, MICHAEL C	Trust Fund Contribution	on	Added to Fees ADDITIONS: Burkett, 1	nichael (Change	S JN 11	
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12. I hereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

4-28-2006

<u>121-198-538</u>2

Daytime Phone #