

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000067511					
1. Entity Name TALL & SMALL RESIDENTIAL CONTRACTING, INC.					
Principal Place of Business 129 84TH AVE. NORTH SAINT PETERSBURG FL 33702			Mailing Address 129 84TH AVE. NORTH SAINT PETERSBURG FL 33702		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3734313	
6. Name and Address of Current Registered Agent SHRIKIAN, KEVORK 129 84TH AVE. NORTH SAINT PETERSBURG FL 33702				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)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD SHRIKIAN, KEVORK 129 84TH AVE. NORTH SAINT PETERSBURG FL 33702	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	U00000413010 02/10/06-80068-024 158.75	
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1st MOORE CR2E034 (10/05)

4. FEI Number **59-3734313** Applied For ☐ Not Applied ☐

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

9. Election Campaign Financing **\$5.00** May: Trust Fund Contribution. ☐ Added to Fees

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *KEVORK SHRIKIAN* - KEVORK SHRIKIAN 1/31/06 (727) 321-498