2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000070414

Entity Name: EPOXY, INC.

FILED Jan 03, 2006 Secretary of State

Name and Address of Current Registered Agent: JAQUES, JEFFREY K 100 SUGAR MAPLE CT SANFORD, FL 32773 US The above named entity submits this statement for the purpose of changing its registered office or rein the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFI Title: PRES () Delete Title: () Change (Name: JAQUES, JEFF Address: 100 SUGAR MAPLE CT City-St-Zip: SANFORD, FL 32773 Title: VP () Delete Title: () Change (Name: DUCKWORTH, RAYMOND Address: 119 BURRISRIDGE DR Address: 119 BURRISRIDGE DR City-St-Zip: LAKELAND, FL 33809 City-St-Zip: City-St-Zip:	rrent Princip	al Place	of Business:		New Principal F	Place of Business:
Current Mailing Address: New Mailing Address: 4855 DISTRIBUTION CT STE 07 ORLANDO, FL 32822 FEI Number: 59-3733549 FEI Number Applied For () FEI Number Not Applicable () Certificat Name and Address of Current Registered Agent: Name and Address of New Regi JAQUES, JEFFREY K 100 SUGAR MAPLE CT SANFORD, FL 32773 US The above named entity submits this statement for the purpose of changing its registered office or rein the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFI Title: PRES () Delete Name: JAQUES, JEFF Address: 100 SUGAR MAPLE CT Name: OICHy-St-Zip: SANFORD, FL 32773 City-St-Zip: SANFORD, FL 32773 City-St-Zip: Title: VP () Delete Name: DUCKWORTH, RAYMOND Name: DUCKWORTH, RAYMOND Address: 119 BURRISRIDGE DR City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 3609 Address: 100 SUGAR MAPLE CT Title: S () Delete Name: JAQUES, JEFF Name: Address: 100 SUGAR MAPLE CT Name: Address: 100 SUGAR MAPLE CT Name: Address: 100 SUGAR MAPLE CT New Mailing Address: 100 SUGAR MAPLE CT	55 DISTRIBUT	TON CT				
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I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY K. JAQUES PRES 01/03/2006