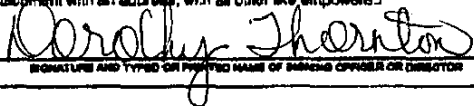


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State

05-03-2006 90242 034 ***158.75

DOCUMENT # P02000026097		
1. Entity Name XCITEMENT PRINTS "CLUB" NETWORK INC.		
Principal Place of Business 750 PLAZA SUITES S. ORANGE BLOSSOM TRAIL # 123 ORLANDO, FL 32805		Mailing Address 750 PLAZA SUITES S. ORANGE BLOSSOM TRAIL #123 ORLANDO, FL 32805
		
04282006 No Chg-P CR2E034 (11/05)		
4. FEI Number 03-0428327		Applied For Not Applicable
5. Certificate of Status Desired ☒		\$0.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
THORNTON, DOROTHY P OWNER 750 PLAZA SUITES S. ORANGE BLOSSOM TRAIL #123 ORLANDO, FL 32805		
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 registering) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$300.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fee
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO THORNTON, DOROTHY 300 N. LAKE LAND AVE. ORLANDO, FL 32805	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ST. LOUIS, YOLANDA 25 COTTAGE HILL RD ORLANDO, FL 32805	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE 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: 		4-29-06 407-849-5004 Date Daytime Phone #