


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 23, 2006 8:00 am
Secretary of State

05-23-2006 90012 013 ***150.00

DOCUMENT # P02000041541	
1. Entity Name APREE SALON & DAY SPA, INC.	

Principal Place of Business 3138 SW MARTIN DOWNS BLVD PALM CITY FL 34990	Mailing Address P.O. BOX 1845 PALM CITY FL 34991-1845
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/05)

4. FEI Number 04-3614298		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent BARTEL, BEVERLY J 2225 SW CREEKSIDE DR PALM CITY FL 34990		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) DATE _____

FILE NOW!!! FEE IS \$150.00. After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BARTEL, BEVERLY J 3138 SW MARTIN DOWNS BLVD PALM CITY FL 34990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV RALSTON, GILBERT R 3138 SW MARTIN DOWNS BLVD PALM CITY FL 34990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COLE, KATHY 2376 SW OAK FORTH CIR PALM CITY FL 34990 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP - SALES ELIZABETH S. MELCHIORIE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1779 ALEXANDER RUN SUITE 200, FL 33478
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY CINDY SCHEID <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1568 SE TIFFANY CL. PLACE PT. ST. LUCIE, FL 34952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Beverly J. Bartel BEVERLY J. BARTEL, V.P. 4/10/06 772-223
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 9340

5/17/06

ATTACHMENT

40094138

PD 20000 41541

Div of Corp.
Annual Report Section

P.O. Box 6850

Tallahassee, FL 32314

Re: Annual Report - 2006

Please be advised that we mailed
our report & check timely in April.
Postmark is 4/29/06.

Today we received back in our
P.O. Box the envelope w/ the report
and check, but no explanation of why
it was returned. It had proper postage.

We kindly ask that you regard this
report as filed timely and waive
any penalty.

Thank you for your understanding of
this matter.

Sincerely
Gilbert R. Rector