


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 03, 2006 08:00 A
Secretary of State

DOCUMENT # P02000089083
 1. Entity Name
STUDY SKILLS, INC.



Principal Place of Business 7891 SW 134 ST MIAMI, FL 33156	Mailing Address 7891 SW 134 ST MIAMI, FL 33156
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DO NOT WRITE IN THIS SPACE



07312006 No Chg-P CR2E034 (11/05)

4. FEI Number 05-0532140	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MANGRUM, CHARLES T II
 7891 SW 134 ST
 MIAMI, FL 33156

DO NOT WRITE IN THIS SPACE

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)

U00000573259
 08/03/06 80003-009 150.00

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANGRUM, CHARLES T II 7891 SW 134 ST MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRICHART, STEPHEN S 2634 GLENDAE DRIVE LOVELAND, CO 80538
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	

DO NOT WRITE IN THIS SPACE

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: Stephen Strichart Stephen Strichart 7/21/06 970-58-1586
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #