

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000091580

1. Entity Name
COLLAGE BOOKS INC.



Principal Place of Business
**4244 CORPORATE SQUARE
NAPLES, FL 34104**

Mailing Address
**4244 CORPORATE SQUARE
NAPLES, FL 34104**



01102007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0479265

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HIRSCH, EMIL G
4244 CORPORATE SQUARE
NAPLES, FL 34104**

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

U000000596392
01/23/07-80077-012 158.75

10. OFFICERS AND DIRECTORS

TITLE
PTD
NAME
HIRSCH, MYRON A
STREET ADDRESS
4244 CORPORATE SQUARE
CITY-ST-ZIP
NAPLES, FL 34104

TITLE
VD
NAME
HIRSCH, JEFFREY W
STREET ADDRESS
4244 CORPORATE SQUARE
CITY-ST-ZIP
NAPLES, FL 34104

TITLE
VSD
NAME
HIRSCH, EMIL G
STREET ADDRESS
4244 CORPORATE SQUARE
CITY-ST-ZIP
NAPLES, FL 34104

TITLE
VD
NAME
HIRSCH, HARRIET
STREET ADDRESS
4244 CORPORATE SQUARE
CITY-ST-ZIP
NAPLES, FL 34104

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:

Emil G. Hirsch
Emil G. Hirsch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-2007
Date

239-643-6464
Daytime Phone #