


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 10, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000094317</b>	
1. Entity Name <b>BUDGET INVESTMENTS, INC.</b>	

Principal Place of Business <b>7740-ULMERTON RD LARGO, FL 33771</b>	Mailing Address <b>7740-ULMERTON RD LARGO, FL 33771</b>
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01042006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>86-1060571</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fees Required
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6. Name and Address of Current Registered Agent  <b>SMILEY, R.W. 7740-ULMERTON RD LARGO, FL 33771</b>
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**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) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P SMILEY, R W 7740 ULMERTON RD LARGO, FL 33771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP BROWN, BARRY 7740 ULMERTON RD LARGO, FL 33771</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S SMILEY, SUE 7740 ULMERTON RD LARGO, FL 33771</b>
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**DO NOT WRITE IN THIS SPACE**

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04/22/06-80048-014 150.0

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:**  **4-5-06 777-539-7666**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #