2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000103941

1. Entity Name

PHOENIX SALES ASSOCIATES, INC.



FILED Mar 06, 2006 8:00 am Secretary of State

03-06-2006 90024 025 ***150.00

Principal Place of Business

2279 SEMINOLE ROAD

SUITE 6

ATLANTIC BEACH, FL 32233

Mailing Address

2279 SEMINOLE ROAD

SUITE 6

DO NOT WRITE IN THIS SPACE

ATLANTIC BEACH, FL 32233



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· 11 \$6 .

No Chg-P

CR2E034 (11/05)

4. FEI Number 04-3714685

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee.Required.___.

6. Name and Address of Current Registered Agent

BREITBART, JERRE G 2279 SEMINOLE ROAD SUITE 6 ATLANTIC BEACH, FL 32233

DO NOT WRITE IN THIS SPACE

| 8. The above the obligat | named entity submits this statement for the puions of registered agent. | urpose of changing its registere | d office or re | egistered agent, or bo | oth, in the State of Florida. I am familiar with, and accept |
|--|--|--|-----------------|--------------------------------|--|
| SIGNATURE_ | Signature, typed or printed name of registered agent and title if | applicable. (NOTE: Registered | Agent signature | required when reinstating) | DATE |
| FIL After Ma | E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00 | 9. Election Campaign Finan Trust Fund Contribution. | cing | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AND DIREC | TORS | | | · · · · · · · · · · · · · · · · · · · |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P BREITBART, JERRE G 2279 SEMINOLE ROAD, SUITE 6 ATLANTIC BEACH, FL 32233 | | | | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| TITLE NAME | | | | | |

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 of 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 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:

STREET ADDRESS

RE AND TYPED OIL PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rendent

1/06 9046623822