## 2006 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # P02000134088** 1. Entity Name

**FILED** Jan 31, 2006 08:00 AN Secretary of State



Principal Place of Business Mailing Address	
10311 HWY. 39 LITHIA, FL 33547 LITHIA, FL 33547	
· 地間日本日、 公里日   第 12872	E034 (11/05)  Applied For Not Applicable \$8.75 Additional
6. Name and Address of Current Registered Agent	Fee Required
LUSZIK, JOSEPH 10311 HWY: 39 LITHIA, FL 33547  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 arganizer required when reinstating)  DATE  1.	
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees	
10. OFFICERS AND DIRECTORS	e e e e e e e e e e e e e e e e e e e
ITILE PD  NAME LUSZIK, JOSEPH  STREETADDRESS 10311 HWY. 39  CITY-ST-ZP LITHIA, FL 33547	
TITLE STD  NAME LUSZIK, MIRIAM  STRIETADDRESS 10311 HWY. 39  CITY-ST-ZIP LITHIA, FL 33547	52 4-017 150.00
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TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	E
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP  12 I thereby crediby that the information supplied with this filling does not qualify by the everyptions contained in Chapter 119 Florida Statutor I further or	

thereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. 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: \_

GOOLING OF FRANCE OF BISHING OFFICER OR DIRECTOR