

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000038501

1. Entity Name
THINGS GRAPHICS, INC.



Principal Place of Business
**9 SPINNING WHEEL LANE
TAMARAC, FL 33319**

Mailing Address
**9 SPINNING WHEEL LANE
TAMARAC, FL 33319**



05122006 No Chg-P CR2E034 (11/05)

4. FEI Number
35-2202271

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**GRANDISON, NORRIS N W
9 SPINNING WHEEL LANE
TAMARAC, FL 33319**

**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
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	D
NAME	GRANDISON, NORRIS N W
STREET ADDRESS	9 SPINNING WHEEL LANE
CITY - ST - ZIP	TAMARAC, FL 33319
TITLE	D
NAME	GRANDISON, AUTHRINE T
STREET ADDRESS	9 SPINNING WHEEL LANE
CITY - ST - ZIP	TAMARAC, FL 33319
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U000000564783
05/20/06-80092-009 150.00

**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:

N. Grandison

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/12/06

Date

Daytime Phone #