. 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 13, 2006 8:00 am Secretary of State **DOCUMENT # P03000061640** 1. Entity Name 04-13-2006 90283 004 ***150.00 NAPLES CUSTOM DESIGNS & UPHOLSTERY INC Principal Place of Business Mailing Address 5477 YAHL ST #23 NAPLES FL 34109 5477 YAHL ST #23 NAPLES FL 34109 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied For 06-1698546 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NOT Oetting , Wayne OETTING, WAYNE JR Street Address (P.O. Box Number is Not Acceptable) 5477 YAHL ST #23 NAPLES FL 34109 Zip Code 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. WAYNE A. OETTING OWNER & PRES. (NOTE: Registoren Agent signature required when reinstalling) SIGNATURE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change Change TITLE D ☐ Delete TITLE ■ Addition DETTING, WAYNE (OETTING, WAYNE JR NAME NAME STREET ADDRESS STREET ADDRESS 5477 YAHL ST #23 CITY-ST-ZIP NAPLES FL 34109 CITY-ST-ZIP OFTTING, WAYNE (NOT IR) ☐ Delete Addition NAME OETTING, WAYNE JR STREET ADDRESS 5477 YAHL ST #23 STREET ADDRESS CITY-ST-7IP CITY-ST-7IP NAPLES FL 34109 ☐ Delete THUE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

WAYNE A. DETTING.

SIGNATURE: \

FILED