2006 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

FILED Apr 28, 2006 08:00 AM Secretary of State

904-399-5620

Daylima Phone #

ANNUAL REPORT				Secretary of State				
1. Entity Nam	MENT # P03000071			500100	ary or a	, cuice		
SAVE MY	reggs - Nguyen, Inc.							
Principal Plac	e of Business	- Mailing Address						
		836 PRUDENTIAL DRIVE SUITE JACKSONVILLE, FL 32207	836 PRUDENTIAL DRIVE SUITE 902 JACKSONVILLE, FL 32207		\$ (MASSINGS) 5th Robins (18th Egith Egith Mass) master about 1860; Carlo Surens (1860) for 1861;			
	Charles Control Control							
D	O NOT WRITE	IN THIS SPA	CE	04262006 4. FEI Number	Na Chg-P	CR2E034 (11	(05) Applied For	
				56-23823	90		Not Applicable	
	<u> </u>	and an emiliar and a second		5. Certificate of S	tatus Desired	□ \$8.78 Fee Re	Additional quired	
6. Name and Address of Current Registered Agent				اني دو انيو	ing parameter	er Appropri	وادار دوارد العالمية وارد الفوارد العالمية المرارد المرارد	
NGUYEN, 836 PRUD	KEVIN ENTIAL DRIVE SUITE 902			DO N	OT WE	RITE		
JACKSONVILLE, FL 32207		-		IN TH	IIS SPA	4CE		
			*. 3			in the second		
6. The above	named entity submits this statement for tions of registered agent.	the purpose of changing its register	ed office or register	ed agent, or both, in	the State of Flori	Ja. I am famillar	with, and accept	
SIGNATURE.								
}	Signature, typed or printed name of registered agent at	nd the it applicable. (NDTE: Registers	d Agent signature required	when reinstating)		DATE		
Fil. After M	.E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	S. Election Campaign Final Trust Fund Contribution.	noing \$5 Add	.00 May Be ed to Fees				
10.	OFFICERS AND S	DIRECTORS		···	14	este no co		
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12. I hereby certify that the information supplied with this filling 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 it made under oath; that I am an officer or director of the corporation or the receiver or trustee amovered 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 ampowered.

SIGNATURE AND THE OF FRINTED HAME OF SIGNING OFFICER OR DIRECTOR