## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000085191

City-St-Zip:

MELBOURNE, FL 32935

FILED Jan 05, 2006 Secretary of State

Entity Na	me: APPLIAN	CE DIRECT XI, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ISION WAY DD, FL 32780	US	7480 NORTH U.S. HIC PORT ST JOHN, FL (		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	BCOCK STRE RNE, FL 32935				
FEI Number	: 20-0129745	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
PRESNICK, DAVE 96 WILLIARD STREET STE 302 COCOA, FL 32922 US			1311 BEDFORD DRIV	COLEMAN, CHRISTOPHER J ESQ. 1311 BEDFORD DRIVE MELBOURNE, FL 32940 US	
	named entity se of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: CHRISTOPHER J. COLEMAN, ESQ.				01/05/2006	
	Electron	ic Signature of Registered Age	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () PAK, SAM 397 N BABCOO MELBOURNE, I		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP () SALMON, MAR 396 N HARBOR MELBOURNE, I	CITY BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	DTS () PAK, EUN BEE 397 N BABCOO		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: SAM PAK DP 01/05/2006