## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000130594

Entity Name: TONGY ENTERPRISES, INC.

FILED Jan 18, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
2384 LYNN WEST PAL	IDR .M BEACH, FL 334	.15 US						
Current Mailing Address:				New Mailing Address:				
2384 LYNN WEST PAL	IDR .M BEACH, FL 334	.15 US						
FEI Number:	20-0386292 FEI	Number App	olied For ( ) Fi	El Number Not Appli	cable ( ) Cer	tificate of Status De	esired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:								
PEREZ, AS 2384 LYNN WEST PAL		.15 US						
The above in the State	named entity submi of Florida.	its this state	ement for the purpo	ose of changing it	s registered office	or registered age	ent, or both,	
SIGNATUR								
			Registered Agent			Date		
Election Carr	npaign Financing Trust	t Fund Conti	ribution ( ).					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P ( ) Delete PEREZ, ASDRUBEL 2384 LYNN DR WEST PALM BEACH,			Title: Name: Address: City-St-Zip:	()Char	nge ( ) Addition		
Title: Name: Address: City-St-Zip:	V () Delete CHANCHAVAC, FRANC 340 WALKER AVE GREENACRES, FL 33	CISCO		Title: Name: Address: City-St-Zip:	()Char	nge ( ) Addition		
Title: Name: Address: City-St-Zip:	T () Delete VELASQUEZ, ANDRE: 512 JENNINGS AVE. GREENACRES, FL 33	S		Title: Name: Address: City-St-Zip:	()Char	nge ( ) Addition		
Title: Name: Address: City-St-Zip:	()Delete	e		Title: Name: Address: City-St-Zip:	S ( ) Char PLA, ISABEL 2384 LYNN DRIVE WEST PALM BEACH	nge (X) 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.

SIGNATURE: ASDRUBEL PEREZ P 01/18/2006