

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000140820

Entity Name: M.J.S. BARRICADES, INC.

FILED
Mar 20, 2006
Secretary of State

Current Principal Place of Business:

10905 N ARDEN AVE
TAMPA, FL 33612

New Principal Place of Business:

34837 CHANCEY RD
ZEPHYRHILLS, FL 335413706

Current Mailing Address:

10905 N ARDEN AVE
TAMPA, FL 33612

New Mailing Address:

34837 CHANCEY RD
ZEPHYRHILLS, FL 335413706

FEI Number: 75-3139228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCALISE, MICHAEL J
10905 N ARDEN AVE
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

SCALISE, MICHAEL J
34837 CHANCEY RD
ZEPHYRHILLS, FL 33541 US

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.

SIGNATURE: MICHAEL J SCALESE

03/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCALISE, MICHAEL J
Address: 10905 N ARDEN AVE
City-St-Zip: TAMPA, FL 33612

Title: VD (X) Delete
Name: SCALISE, SHAWN
Address: 10905 N ARDEN AVE
City-St-Zip: TAMPA, FL 33612

Title: STD () Delete
Name: SCALISE, JENNIFER
Address: 10905 N ARDEN AVE
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCALISE, MICHAEL J
Address: 34837 CHANEY RD
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: SCALISE, JENNIFER
Address: 34837 CHANCEY RD
City-St-Zip: ZEPHYRHILLS, FL 335413706

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: MICHAEL J SCALISE

PD

03/20/2006

Electronic Signature of Signing Officer or Director

Date