# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Nov 14, 2006**
**Secretary of State**

DOCUMENT# P04000031464

**Entity Name:** FRANCHISE EQUITY PARTNERS, INC

**Current Principal Place of Business:**

1140 S. SEMERON BLVD
F
ORLANDO, FL 32807

**New Principal Place of Business:**

**Current Mailing Address:**

1140 S. SEMERON BLVD
F
ORLANDO, FL 32807

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MARTIN, LETICIA
1140 S. SEMERON BLVD
F
ORLANDO, FL 32807 US

**Name and Address of New Registered Agent:**

BOBIAN, PAUL
1140 S. SEMERON BLVD
F
ORLANDO, FL 32807 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: PAUL BOBIAN 11/14/2006
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete
Name: MERCHANT SETTLEMENT, & TRADE CORP
Address: 1140 S. SEMERON BLVD SUITE F
City-St-Zip: ORLANDO, FL 32807

Title: D (X) Delete
Name: CORNELIUS, JAYSON
Address: 1140 S. SEMERON BLVD SUITE F
City-St-Zip: ORLANDO, FL 32807

Title: D (X) Delete
Name: MARTIN, LETICIA
Address: 1140 S. SEMERON BLVD SUITE F
City-St-Zip: ORLANDO, FL 32807

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: BOBIAN, PAUL SR
Address: 1140 S. SEMERON BLVD SUITE F
City-St-Zip: ORLANDO, FL 32807

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

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

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: PAUL BOBIAN P 11/14/2006
Electronic Signature of Signing Officer or Director Date