2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# P04000042871

Entity Name: ARCHIVE SUPPLIES OF FLORIDA, INC.

Current Principal Place of Business:

640 S SHELFER ST
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

640 S SHELFER ST
QUINCY, FL 32351

New Mailing Address:

FEI Number: 20-0836071 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZUBR, WANDA
640 S SHELFER ST
QUINCY, FL 32351 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ZUBR, WANDA
Address: 640 S SHELFER ST
City-St-Zip: QUINCY, FL 32351

Title: D ( ) Delete
Name: ZUBR, HALINA E
Address: 640 S SHELFER ST
City-St-Zip: QUINCY, FL 32351

Title: D ( ) Delete
Name: HOCKETT, MILTON
Address: 525 S BOWEN
City-St-Zip: ARLINGTON, TX 76013

Title: D (X) Delete
Name: FISHER, RICHARD
Address: 5902 DESERT TR
City-St-Zip: DALLAS, TX 75252

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ZUBR, WANDA
Address: 640 S SHELFER ST
City-St-Zip: QUINCY, FL 32351

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

Title: D (X) Change ( ) Addition
Name: ZUBR, ANDREAS
Address: 640 S SHELFER ST
City-St-Zip: QUINCY, FL 32351

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: WANDA ZUBR P 04/28/2006

Electronic Signature of Signing Officer or Director Date