_2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 20, 2006 08:00 AM Secretary of State

1. Entity Nam	MENT # P040000500 pnso, INC.				Scerciar,	y of State
Principal Place of Business Mailing Address 1803 OSPREY LANE LUTZ, FL 33549 LUTZ, FL 33549			į			
DO NOT WRITE IN THIS SPACE				01302006 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For		
				54-2147174 Not Applicable 5. Certificate of Status Desired Search Fee Required		
6. Name and Address of Current Registered Agent				1		
ALONSO, IVAN 1803 OSPREY LANE LUTZ, FL 33549			DO NOT WRITE IN THIS SPACE			
 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. I am lamiliar with, and accept the obligations of registered agent. 						
SIGNATURE						
FILE NOWIN FEE IS \$150.00 3. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees						
10.	OFFICERS AND DI	RECTORS	-			
TITLE NAME	ALONSO, IVAN		i i			
STREET ADDRESS CATY-ST-ZIP	1803 OSPREY LANE LUTZ, FL 33549				######################################	52
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CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, Plottda Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR