

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000057515

FILED
Sep 22, 2006
Secretary of State

Entity Name: NORTH AMERICAN PRESS PRODUCTS INC

Current Principal Place of Business:

9456 AZALEA RIDGE WAY
GOTHA, FL 34734 US

New Principal Place of Business:

Current Mailing Address:

9456 AZALEA RIDGE WAY
GOTHA, FL 34734 US

New Mailing Address:

FEI Number: 20-0987799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEAVER, KEVIN A
2656 RUNYON CIRCLE
ORLANDO, FL 32837 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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: WEAVER, KEVIN A
Address: 2656 RUNYON CIRCLE
City-St-Zip: ORLANDO, FL 32837 US

Title: PRES () Delete
Name: BUONO, MICHAEL J
Address: 2401 GRAND POPLAR STREET
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WEAVER, KEVIN A
Address: 2656 RUNYON CIRCLE
City-St-Zip: ORLANDO, FL 32837 US

Title: PRES (X) Change () Addition
Name: BUONO, MICHAEL J
Address: 2401 GRAND POPLAR STREET
City-St-Zip: OCOEE, FL 347617647 US

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: KEVIN A WEAVER

D

09/22/2006

Electronic Signature of Signing Officer or Director

Date