2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000128863

ALL OCCASION PHOTOGRAPHY, INC.



FILED May 01, 2006 08:00 AN Secretary of State

Fee Required

Principal Place of Business

3875 CYPRESS RUN ROAD N. FORT MYERS, FL 33917 Mailing Address

3875 CYPRESS RUN ROAD N. FORT MYERS, FL 33917



DO NOT WRITE IN THIS SPACE

02272006 No Chg-P 4. FEI Number 20-1607249		CR2E034 (11/05)			
			Applied For		
			Not Applicat		
5. Certificate of S	Status Desired		\$8.75 Additional		

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TRUBENBACH, EDWARD H 3875 CYPRESS RUN ROAD N. FORT MYERS, FL 33917

DO NOT WRITE IN THIS SPACE

8. 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 familiar with, and accept the obligations of registered agent.							
SIGNATURE Columnal A Juliabrat Edward H. Trubrabach Pers 7/24/06 Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campaign Fir Trust Fund Contribution		.00 May Be led to Fees	000000557278 05/17/06-80043-008 150.00		
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TRUBENBACH, EDWARD H 3875 CYPRESS RUN ROAD N. FORT MYERS, FL 33917						
TITLE NAME STREET ADDRESS CITY+ST-ZIP	V TRUBENBACH, BARBARA A 3875 CYPRESS RUN ROAD N. FORT MYERS, FL 33917						
TITLE NAME STREET ADDRESS CITY - ST - ZIP				DO	NOT WRITE		
TITLE NAME STREET AODRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY+SI+ZIP							
TITLE NAME STREET ADDRESS CITY-SI-ZIP							
12. Thereby certify that the information supplied with this filling 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							