
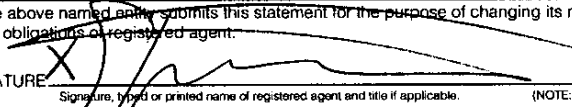
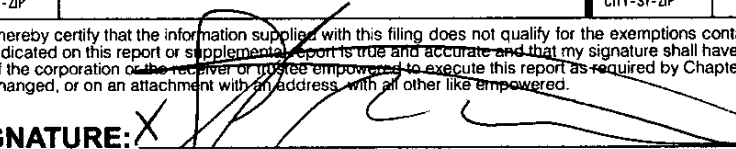


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90351 006 ***150.00

DOCUMENT # P04000134965 1. Entity Name SERGIO J. LA GRASTA, INC.																													
Principal Place of Business 506 106TH AVE N NAPLES, FL 34108			Mailing Address 506 106TH AVE N NAPLES, FL 34108																										
2. Principal Place of Business 71 Madison Drive Suite, Apt. #, etc.		3. Mailing Address 71 Madison Drive Suite, Apt. #, etc.																											
City & State Naples FL		City & State Naples FL		4. FEI Number 26-0100881																									
Zip 34110		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent LA GRASTA, SERGIO J 506 106TH AVE N NAPLES, FL 34108			7. Name and Address of New Registered Agent Name Sergio J. La Grasta Street Address (P.O. Box Number is Not Acceptable) 71 Madison Drive City Naples FL Zip Code 34110																										
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 a registered agent. SIGNATURE:  DATE: 4/24/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">P LA GRASTA, SERGIO J</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">506 106TH AVE N</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">NAPLES, FL 34108</td> </tr> </table>			TITLE	P LA GRASTA, SERGIO J	<input type="checkbox"/> Delete	NAME			STREET ADDRESS	506 106TH AVE N		CITY-ST-ZIP	NAPLES, FL 34108		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">P Sergio J. La Grasta</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">71 Madison Drive</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">Naples FL 34110</td> </tr> </table>			TITLE	P Sergio J. La Grasta	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS	71 Madison Drive		CITY-ST-ZIP	Naples FL 34110	
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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. SIGNATURE:  DATE: 4/24/06 (239) 645-6290 <small>Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																													