2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141558

Entity Name: MASSAGE INC.

FILED May 01, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1474 S. 3RD STREET

JACKSONVILLE BEACH, FL 32250

Current Mailing Address: New Mailing Address:

1474 S. 3RD STREET

JACKSONVILLE BEACH, FL 32250

FEI Number: 80-0124405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MONTANDON, CRYSTAL
1474 S. 3RD STREET

FULCO, CRYSTAL
1474 S. 3RD STREET

JACKSONVILLE BEACH, FL 32250 US JACKSONVILLE BEACH, FL 32250 US

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: CRYSTAL FULCO 05/01/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: DPST (X) Change () Addition

Name: MONTANDON, CRYSTAL Name: FULCO, CRYSTAL Address: 15150 BELLE RIVE BLVD, EAST #2302 Address: 1882 SCRUBBY BLUFF RD

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: KINGSLAND, GA 31548

Title: VP/D () Delete Title: DVP (X) Change () Addition Name: HOFFMAN, AUDREY Name: CARTER, JAIME

Address: 5204 HIDE A WAY DRIVE Address: 1474 S. 3RD STREET

City-St-Zip: JACKSONVILLE, FL 32258

City-St-Zip: JACKSONVILLE, FL 32250

Title: T/D (X) Delete Title: () Change () Addition

 Name:
 HOFFMAN, AUDREY
 Name:

 Address:
 5204 HIDE A WAY DR
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32258
 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: CRYSTAL FULCO DPST 05/01/2006