2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 27, 2006 08:00 AM Secretary of State DOCUMENT # P04000153922 QUICK PICK OF ST PETERSBURG, INC Principal Place of Business Mailing Address 800 58TH STREET N 800 58TH STREET N ST PETERSBURG, FL 33710 ST PETERSBURG, FL 33710 02182006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1870084 Not Applicate \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARRIGAN, THOMAS J DO NOT WRITE 3910 NORTHDALE BLVD SUITE 100 IN THIS SPACE **TAMPA, FL 33624** 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. Signature, typed or printed name of registerno egent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PRES U00000448964 03/03/06-80035**-00**5 1**50.00** NAME BHUIYAN, REHANA 9997 SAGO POINT DRIVE STREET ADDRESS CITY-ST-ZIP SEMINOLE, FL 33777 TITLE NAME BHUIYAN, ABUL B STREET ADDRESS 9997 SAGO POINT DRIVE CITY-ST-27P SEMINOLE, FL 33777 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby 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 direction 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 changed, or on an attachment with an acdress, with all other like empowered.

SIGNATURE:

MARK STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

REHANA BHUIYAN