2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 06, 2006 8:00 am Secretary of State

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DOCUMENT # P05000006971 1. Entity Name P. R. GOULD, INC.						Secretary of State 04-06-2006 90017 017 ***150.00		
Principal Plac	ce of Business	Mailing Address			\neg			
7640 N.W. 2 Margate, F		7640 N.W. 28 ST. Margate, FL 33063	US	•	4004	5331		
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03092006	Chg-P	CR2E034 (11/05)		
City & Star	te	City & State			34.20	31/25		oplied For
Zip	Country	Zip	Country	<u> </u>		of Status Desired	S8.75 Ad	ditional
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New F	Registered Agent	
GOULD, PAUL R				Name				
7640 N.W.				Street Address	(P.O. Box Numb	er is Not Acceptabl	e)	
			-	City	<u> </u>		FL Zip Cod	le
8. The above	named entity submits this statement for	the purpose of changing its re	egistered	office or regist	ered agent, or bo	th, in the State of FI		and accept
the obligat	tions of registered agent.	\sim \sim \sim			-			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register				gent signature requir	red when reinstating)		3/21/06	· .
FiL Affar M	E NOW!!! FEE IS \$150.00	9. Election Campaig	- Cinna	na ¢ i				
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10.	ay 1, 2006 Fee will be \$550.0 OFFICERS AND I	Trust Fund Contril			ided to Fees	CHANGES TO OFF	FICERS AND DIRECTOR	S IN 11
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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: _>

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/0 6.
Date Oavime Phon

Daytime Phone #