

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013288

FILED
Aug 14, 2006
Secretary of State

Entity Name: THE ADULT SHOPPING NETWORK, INC.

Current Principal Place of Business:

1345 N LOTUS DR
DUNEDIN, FL 34698

New Principal Place of Business:

5340 CENTRAL AVE
ST. PETERSBURG, FL 33707

Current Mailing Address:

1345 N LOTUS DR
DUNEDIN, FL 34698

New Mailing Address:

5340 CENTRAL AVE
ST. PETERSBURG, FL 33707

FEI Number: 20-0780114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIZIO, ARMANDO F
25400 US 19 N STE 210
CLEARWATER, FL 33763 US

Name and Address of New Registered Agent:

ANTHONY J. COMPARETTO
5340 CENTRAL AVE
ST. PETERSBURG, FL 33707 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: ANTHONY J COMPARETTO

08/14/2006

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:

Title: DCEO () Delete
Name: SCHOOLCRAFT, ROBERT B JR
Address: 1345 N LOTUS DR
City-St-Zip: DUNEDIN, FL 34698

Title: PST () Delete
Name: SCHOOLCRAFT, ROBERT B JR
Address: 1345 N LOTUS DR
City-St-Zip: DUNEDIN, FL 34698

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: COMPARETTO, ANTHONY
Address: 5340 CENTRAL AVE
City-St-Zip: ST. PETERSBURG, FL 33707

Title: VP (X) Change () Addition
Name: CLIFF, GEPHART A
Address: 5340 CENTRAL AVE
City-St-Zip: ST. PETERSBURG, FL 33707

Title: VP () Change (X) Addition
Name: DICKSON, TODD J
Address: 5340 CENTRAL AVE
City-St-Zip: ST. PETERSBURG, FL 33707

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: CLIFF GEPHART

VP

08/14/2006

Electronic Signature of Signing Officer or Director

Date