

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
May 09, 2006 8:00 am
Secretary of State

05-09-2006 90084 043 ***150.00

40089908

1st MOORE CR2E034 (10/05)

DOCUMENT 05000002518A 1. Entity Name PRISCILLA + KIDS WHOLESALERS INC.					
Principal Place of Business Mailing Address 23 PARK AVE. (SAME) VERO BEACH FL 32960				40089908	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		4. FEI Number 20-2356354	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DOMINICK F. MALGERI 23 PARK AVE. VERO BEACH FL 32960				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when registering) DATE _____					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	
	PRES. DOMINICK F. MALGERI	23 PARK AVE.	VERO BEACH FL 32960		
				☐ Delete	
				☐ Delete	
				☐ Delete	
				☐ Delete	
				☐ Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
				☐ Change ☐ Addition	
				☐ Change ☐ Addition	
				☐ Change ☐ Addition	
				☐ Change ☐ Addition	
				☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addendum, with all other like empowered.					
SIGNATURE: X DOMINICK F. MALGERI 7/27/06					