2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

5/:

FILED
Jun 22, 2006 8:00 am
Secretary of State

05-03-2006 90203 018 ***150.00

DOCUMENT # P05000031087

1. Entity Name

BEAU RIALS DIRECT, INC.

Principal Place of Business	Mailing Address
10920 STATE RD 70 EAST - # 14 BRADENTON FL 34202	10920 STATE RD 70 EAST - # 14 BRADENTON FL 34202

1st MOORE CR2E034 (10/05)

2. Principal Place of Business	3. Mailing Address
20808 67th Avenue E.	20808 67th Avenue E.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Bradenton, FL.	City & State: Bradenton FL.
Zip: 34211 Country: USA	Zip: 34211 Country: USA

4. FEI Number: 20-2427302 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RIALS, BEAU 10920 STATE RD 70 EAST - # 14 BRADENTON FL 34202	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: BEAU RIALS 4-23-06

(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when resigning) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	RIALS, BEAU	NAME	
STREET ADDRESS	20808 67TH AVE EAST	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34211	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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 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: 4-23-06 (941) 737-7994

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

6/15/06

Division of Corp.

66020407

#P05000031081

Just sat back from the road and got your letter.

Please find the FEI # added —

Thanks for not assessing a late fee — (I had the $150 in on time)

Sandy Riley