## √ 2006 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## Jan 19, 2006 8:00 am Secretary of State DOCUMENT # P05000045404 01-19-2006 90065 027 \*\*\*150.00 FRED'S INTERNATIONAL CUSTOMS WOODWOORK, Principal Place of Business Mailing Address 2846 RED LION SQUARE 2846 RED LION SQUARE WINTER PARK, FL 32792 WINTER PARK, FL 32792 3. Mailing Address Suite, Apt. #, etc. CR2E034 (11/05) 01142006 Chg-P City & Stat 4. FEI Number City & State Applied For 38 - 371*80*6 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Orange Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GJINI, ALFRED Street Address (P.O. Box Number is Not Acceptable) 2846 RED LION SQUARE 6124 Hanging WINTER PARK, FL 32792 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 DATE agent and title if Applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. ☐ Change ■ Addition D Delete TITLE TITLE GJINI, ALFRED NAME NAME STREET ADDRESS STREET ADDRESS 2846 RED LION SQUARE CITY-ST-ZIP WINTER PARK, FL 32792 CITY-ST-ZIP TITLE Change ■ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE 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 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

SIGNING OFFICER OR DIRECTOR

**FILED** 

01/17/06 (407)7488857