## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 04, 2006 8:00 am Secretary of State

1. Entity Nam	MENT # P05000050 ELY BAG LADIES, INC.	0005				04-17-200	06 90347 0	)21 ***	150.00
Principal Place 13848 4TH DADE CITY, F	STREET, APT 208	Mailing Address 13848 4TH STREET, APT DADE CITY, FL 33525	208	,					
1870	tace of Business	3. Mailing Address POB 17621							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			04052006	Chg-P	CR2E034	(11/05)	
Civesa	ecity Fa	City & State	M FZ	A	4. FEI Number	20452	81		plied For t Applicable
Zip 3335	こう Country USA	Zip 34276	Country ST	•	5. Certificate of		\$8	.75 Add Require	
	6. Name and Address of Current	Registered Agent	Momen		7. Name and Ac	dress of New R	legistered Age	nt	
HARRAW	OOD, LISA		(Agus 6)	<u> 4+ Cu</u>	bine				
	1 STREET, APT 208 Y, FL 33525		Street A	99 95 (P	.C. Bux Number i	S Not Acceptable	<u>, 69</u>		
1	1,12 00020			サル	5				j
			City S	AZAS	στΑ	<u></u>	FL	Zip Code	عرع
	named entity submits this statement fo	r the purpose of changing its reg	gistered office or	r registere	d agent, or both,	in the State of Flo	orida. I am fam		
the obligations of registered agent.  SIGNATURE Public Culine Published							4-6-	<u> </u>	
	Signature, typed or prifield name of registered agent in	and title if applicable. (NOTE: Re	ecisseed Agent signes.	ure required o	men reinsteting)		DATE		
FILE NOWIII FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees									
10.	P/D OFFICERS AND	DIRECTORS Delete	11.	P/		IANGES TO OFF		RECTORS	Addition
HAME	HARRAWOOD, LISA	DE cees	NAME		Sy Woin		L		
STREET ADDRESS	13848 4TH STREET, APT 208			l Pat	<b>77 7</b>				r
COV-ST-7P	1		STREET ADDRESS CITY-ST-70P	1000	ובטרו		اله		
CITY-ST-ZIP TITLE	DADE CITY, FL 33525	☑ Delete	STREET ADDRESS CITY-ST-ZIP TITLE	90B 500	17621 asota, Fl starleas	a 3427		Change	Addition
FITLE NAME	DADE CITY, FL 33525 VP/D CUBINE, PAT	☑ Delete	CITY-ST-ZEP TITLE NAME	SULT SULT CAR	17621 250te, Fl Stares Stares	a 3427 11 1917		Change	<b>■ Addition</b>
FITLE	DADE CITY, FL 33525 VP/D	☑ Delete	CITY-ST-ZP	SUR SUR CAR CAR 364	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DADE CITY, FL 33525  VP/D  CUBINE, PAT  13848 4TH STREET, APT 208  DADE CITY, FL 33525  T	☑ Delete ☑ Tetete	CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE	SUR SUR CAR CAR 364	17621 250te, Fl Stares Stares	4 3427 24 1917 11 10	95127	Change Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DADE CITY, FL 33525  VP/D CUBINE, PAT 13848 4TH STREET, APT 208 DADE CITY, FL 33525  T HARRAWOOD, LISA		CITY-ST-ZEP TITLE NAME STREET ADDRESS CITY-ST-ZEP	SUR SUR CAR CAR 364	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10	95127		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DADE CITY, FL 33525  VP/D  CUBINE, PAT  13848 4TH STREET, APT 208  DADE CITY, FL 33525  T	El Vetete	CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SUR SUR CAR CAR 364	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10	95127		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DADE CITY, FL 33525  VP/D CUBINE, PAT 13848 4TH STREET, APT 208 DADE CITY, FL 33525  T HARRAWOOD, LISA 13848 4TH STREET, APT 208 DADE CITY, FL 33525 S		CITY-ST-ZIP  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	SUR SUR CAR CAR 364	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10	95127 0		
HITLE NAME SIREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS	DADE CITY, FL. 33525  VP/O CUBINE, PAT 13848 4TH STREET, APT 208 DADE CITY, FL. 33525  T HARRAWOOD, LISA 13848 4TH STREET, APT 208 DADE CITY, FL. 33525 S CUBINE, PAT 13848 4TH STREET, APT 208	El Vetete	CITY-ST-ZIP  TITLE MAME STREET ADDRESS CITY-ST-ZIP  TITLE MAME STREET ADDRESS CITY-ST-ZIP  TITLE MAME STREET ADDRESS	SUR SUR CAR CAR 364	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10	95127 0	Change	☐ Addition
TITLE NAME SIREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	DADE CITY, FL. 33525  VP/O CUBINE, PAT 13848 4TH STREET, APT 208 DADE CITY, FL. 33525  T HARRAWOOD, LISA 13848 4TH STREET, APT 208 DADE CITY, FL. 33525  S CUBINE, PAT	El Vetete El Detete	CITY-ST-ZIP  TITLE  MAME STREET ADDRESS CITY-ST-ZIP  TITLE  MAME STREET ADDRESS CITY-ST-ZIP  TITLE  MAME STREET ADDRESS CITY-ST-ZIP	500 500 500 600 600 600 600 600 600 600	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10	95127 0	Change Change	Addition
TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE MAME STREET ADDRESS	DADE CITY, FL. 33525  VP/O CUBINE, PAT 13848 4TH STREET, APT 208 DADE CITY, FL. 33525  T HARRAWOOD, LISA 13848 4TH STREET, APT 208 DADE CITY, FL. 33525 S CUBINE, PAT 13848 4TH STREET, APT 208	El Vetete	CITY-ST-ZIP  TITLE MAME STREET ADDRESS CITY-ST-ZIP  TITLE MAME STREET ADDRESS CITY-ST-ZIP  TITLE MAME STREET ADDRESS	500 500 500 600 600 600 600 600 600 600	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10	95127 0	Change	☐ Addition
HITLE NAME SIREFI ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS STREET ADDRESS	DADE CITY, FL. 33525  VP/O CUBINE, PAT 13848 4TH STREET, APT 208 DADE CITY, FL. 33525  T HARRAWOOD, LISA 13848 4TH STREET, APT 208 DADE CITY, FL. 33525 S CUBINE, PAT 13848 4TH STREET, APT 208	El Vetete El Detete	CITY-ST-ZIP  TITLE MAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	500 500 500 600 600 600 600 600 600 600	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10	95127 0	Change Change	Addition
HITLE NAME SIREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME NAME	DADE CITY, FL. 33525  VP/O CUBINE, PAT 13848 4TH STREET, APT 208 DADE CITY, FL. 33525  T HARRAWOOD, LISA 13848 4TH STREET, APT 208 DADE CITY, FL. 33525 S CUBINE, PAT 13848 4TH STREET, APT 208	El Vetete El Detete	CITY-ST-ZIP  TITLE MAME STREET ADDRESS CITY-ST-ZIP  TITLE MAME TREET ADDRESS	500 500 500 600 600 600 600 600 600 600	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10	95127 0	Change Change	Addition
HITLE NAME SIREFI ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME	DADE CITY, FL. 33525  VP/O CUBINE, PAT 13848 4TH STREET, APT 208 DADE CITY, FL. 33525  T HARRAWOOD, LISA 13848 4TH STREET, APT 208 DADE CITY, FL. 33525 S CUBINE, PAT 13848 4TH STREET, APT 208	El Vetete El Detete	CITY-ST-ZIP  TITLE MAME STREET ADDRESS CITY-ST-ZIP	500 500 500 600 600 600 600 600 600 600	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10	95127 0	Change Change	Addition  Addition
HITLE NAME SIREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE	DADE CITY, FL. 33525  VP/O CUBINE, PAT 13848 4TH STREET, APT 208 DADE CITY, FL. 33525  T HARRAWOOD, LISA 13848 4TH STREET, APT 208 DADE CITY, FL. 33525 S CUBINE, PAT 13848 4TH STREET, APT 208	El Vetete El Detete	CITY-ST-ZIP  TITLE MAME STREET ADDRESS CITY-ST-ZIP  TITLE MAME	500 500 500 600 600 600 600 600 600 600	17621 250 te., Fl Stina Be Stina a Gordon ai	4 3427 24 1917 11 10	95127 0	Change Change	Addition  Addition

12. I hereby certify that the information supplied with this filling 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 cath; 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.

 	 		-
$\sim$		•	

SIGNATURE: Holy Culine

s 4-6-00

941.266.8730

Date