## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000056802

City-St-Zip:

JACKSONVILLE, FL 32256

FILED May 04, 2006 Secretary of State

Entity Na	me: FACTOF	RY DIRECT BRANDS, INC.			
Current P	rincipal Place	e of Business:	New Principal Place of Business:		
	NBURY CT S IVILLE, FL 32	256			
Current Mailing Address:			New Mailing Address:		
	NBURY CT S IVILLE, FL 32:	256			
FEI Number	: 20-2716508	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
GANNAM, ROGER K 50 N LAURA ST STE 2600 JACKSONVILLE, FL 32202 US			SUITE 126	12276 SAN JOSE BLVD	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: ROGER K GANNAM				05/04/2006	
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no	t receive the prior notice.		
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ( ABRAHAM, NC 8706 GLENBU JACKSONVILL	RY CT S	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ABRAHAM, JA 8706 GLENBU JACKSONVILL	RY CT S	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ABRAHAM, PA 8706 GLENBU JACKSONVILL	RY CT S	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	D (X FRANCIS, DAL 8706 GLENBU		Title: ( Name: Address:	) Change ()Addition	

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.

City-St-Zip:

SIGNATURE: NORMAN ABRAHAM 05/04/2006 D