2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 04, 2006 8:00 am Secretary of State

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1. Entity Nam	IMENT #PI STORES, INC	05000068	790				02-02-20	JU6 300 <i>3</i>	9 024 -	*150.00
Principal Plac	ce of Business	_	Mailing Address				- = 0 (•		
1710 45TH	STREET		1710 45TH STREET			60	;008509	}		
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2. Principal Place of Business			3. Mailing Address							
Suite, Apr. #, etc.		ļ	Suite, Apt. #, etc.			01242006	Chg-P	CR2EC)34 (11/05) 	
City & Stat			City & State			4. FEI Numbe	2046	906	. 	oplied For at Applicable
Zip	Cour	tiry	Zip	Coun	itry	5. Certificate	of Status Desired	´ _	\$8.75 Add	
	S. Name and Ac	Idress of Current R	Penistared Apent	⊥					Fee Require	đ
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DELISI, M.										
	RTHLAKE BLVD	CI 22440			Street Address	ss (P.O. Box Numbe	r is Not Acceptab	le)		
PALM DEA	ACH GARDENS,	FL 33410			-					
					City			FL	Zip Cod	e
8. The above	named entity submit	ts this statement for	the purpose of changing its	s registere	ed office or regis	stered agent, or bot	n, in the State of F		tamiliar with,	and accept
' the obligat	itions of registered a	ent				-	-	_	•	
SIGNATURE.				· <u>-</u>						
_		name of registered agent an	to Lite 4 applicable (NO	l E: Registere	nd Agent aignekite requi	umed when rematating)		DATE		
SIGNATURE.		name of registered agent and	9. Election Campa	aign Finan	ncing \$	\$5.00 May Be Added to Fees		DATE	- " <u>.</u>	
SIGNATURE.	Sgraum, typed or preted to pre	name of registered agent and	9. Election Campa Trust Fund Can	aign Finan	ncing \$	\$5.00 May Be Added to Fees	CHANGES TO OF		DIRECTOR	S IN 11
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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 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 chapter 607 or on an attachment with an address, with all other like empowered.

SIGNATURE: \(\sigma\)

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/25/06

(561)8630062 Daystra Proces 3