

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2006 8:00 am
Secretary of State

06-05-2006 90147 005 ***150.00

DOCUMENT # P05000122374 1. Entity Name PAYLESS ENTERPRISES, INC.					
Principal Place of Business 111 N PINE ISLAND ROAD STE 205 PLANTATION, FL 33324			Mailing Address 111 N PINE ISLAND ROAD STE 205 PLANTATION, FL 33324		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 04-3826726	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent DSOUZA, ELIAS L ESQ 111 N PINE ISLAND ROAD STE 205 PLANTATION, FL 33324				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPS GABAEFF, PHYLLIS 111 N PINE ISLAND ROAD STE 205 PLANTATION, FL 33324 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Phyllis Gabaeff</i> May 9 06			561 391-3879		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

50020646



05092006 Chg-P CR2E034 (11/05)

\$8.75 Additional Fee Required

ATTACHMENT

~~5-0020644~~
~~#P05000122374~~

5/9/06

To whom it may concern!

On April 5, 2006, \$150 was deposited at the SunTrust Bank in Boca Raton, FL, for my Annual Report.

The Bank deposited this money to the I.R.S. for income tax. There was no income tax due, and the \$150⁰⁰ should have been credited for the Annual Report. This was an error by the bank.

All paperwork relevant to these transactions are enclosed. (1) The correspondence from the I.R.S., and the cancelled check to the Division of Corporations are attached as well. Since the error was on the part of the bank, I strongly feel it should not be penalized for following instructions. Please see enclosures.

Very Truly yours,

Phyllis Gabe