2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2006
Secretary of State

DOCUMENT# P05000155535

Entity Name: PAPA'S FINE CAKES AND PASTRIES, INC.

Current Principal Place of Business:

3627 DUPONT AVENUE UNIT 700
JASCKSONVILLE, FL 32217

New Principal Place of Business:

3627 DUPONT AVENUE UNIT 700
JASCKSONVILLE, FL 32217 US

Current Mailing Address:

3627 DUPONT AVENUE UNIT 700
JASCKSONVILLE, FL 32217

New Mailing Address:

3627 DUPONT AVENUE UNIT 700
JASCKSONVILLE, FL 32217 US

FEI Number: 20-3831715 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOLAN, JAMES A P.A.
4114 HERSCHEL ST. ST. JOHNS PROFESSIONAL C
ENTER SUITE 105
JASCKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

COLLINS, PAUL R
3627 DUPONT AVENUE UNIT 700
JASCKSONVILLE, FL 32217 US

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.

SIGNATURE: PAUL COLLINS 03/10/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Change (X) Addition
Name: COLLINS, PAUL R
Address: 3627 DUPONT AVENUE UNIT 700
City-St-Zip: JASCKSONVILLE, FL 32217 US

Title: VP ( ) Change (X) Addition
Name: COLLINS, SHARRON A
Address: 3627 DUPONT AVENUE UNIT 700
City-St-Zip: JASCKSONVILLE, FL 32217 US

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.

SIGNATURE: PAUL COLLINS PRES 03/10/2006
Electronic Signature of Signing Officer or Director Date