2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 16, 2006 8:00 am Secretary of State

4/17/06

Daytime Phone #

DOCUMENT # P05000155937 1. Entity Name FEE FI FAUX ARTISTS CORP.								05-16-2006 9	0025 (002 ***150	0.00
6080 12TH AVE SW				Mailing Address 6080 12TH AVE SW				ZUUUNIP			
NAPLES, FL 34116 NAPLES, FL 34116							2 IEE/IEE/ (II	PRINT SIIN NOTE AND ARE			TIER: 15 IER:
2. Principal Place of Business				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.			04162006	Chg-P	CR2E	2034 (11/05)	
City & State				City & State			4. FEI Numbi	20-3488	138		pplied For ot Applicable
Zip	Country			Zip Coun		itry	5. Certificate	of Status Desired		\$8.75 Add	
	6. Name	and Address	s of Current Regis	···			7. Name and Address of New Registered Agent				
EVANS I	AMES M				Name						
EVANS, JAMES M 6080 12TH AVE SW NAPLES, FL 34116						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											
		FEE IS \$1 6 Fee will	50.00 be \$550.00	9. Election Campa Trust Fund Con			5.00 May Be dded to Fees			7.00.0	
10.	OFFICERS AND			CTORS		ADDITIONS	CHANGES TO OFF	ICERS AN	ND DIRECTORS	\$ IN 11	
TITLE NAME STREET ADDRESS	P/D EVANS, JAMES M s 6080 12TH AVE SW			☐ Delete TITL NAM						☐ Change	☐ Addition
CITY-ST-ZIP	NAPLES, FL 34116				-SI-ZIP						
TITLE NAME				Delete	TITL	Į.				Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP						EET ADDRESS '-ST-ZIP					
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STREET ADDRESS						EET ADDRESS					
CITY-ST-ZIP					CITY	r-\$T-ZIP					
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.											

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SIGNATURE: __