

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000168045

FILED  
Sep 06, 2006  
Secretary of State

Entity Name: CHARLESTON'S FRAMING & BEYOND INC.

## Current Principal Place of Business:

1055 SO. CONGRESS AVE  
DELRAY BEACH, FL 33445 US

## New Principal Place of Business:

## Current Mailing Address:

1055 SO. CONGRESS AVE  
DELRAY BEACH, FL 33445 US

## New Mailing Address:

FEI Number: 20-3337471      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHARLESTON, DANIEL  
9338 SW 3RD STREET  
505  
BOCA RATON, FL 33428 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CHARLESTON, DANIEL  
Address: 9338 SW 3RD STREET, APT 505  
City-St-Zip: BOCA RATON, FL 33428 US

Title: VP ( ) Delete  
Name: CHARLESTON, GERALD  
Address: 10-B ROBERTS S. ROBERTS RD  
City-St-Zip: HIGHLAND, NY 12528 US

Title: M/C ( ) Delete  
Name: CHARLESTON, SCHUBERT  
Address: 2337 HOLDEN WAY  
City-St-Zip: KENNISAW, GA 30144 US

Title: TREA ( ) Delete  
Name: CHARLESTON, HEBERT  
Address: 126 BURGUNDY HILL LN  
City-St-Zip: MIDDLETOWN, CT 06457 US

Title: M/C ( ) Delete  
Name: DIANE, THAMMAVONGSA  
Address: 9338 SW 3RD STREET, APT 505  
City-St-Zip: BOCA RATON, FL 33428 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DANIEL CHARLESTON

PRES

09/06/2006

Electronic Signature of Signing Officer or Director

Date