
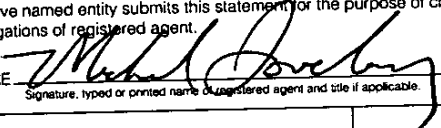
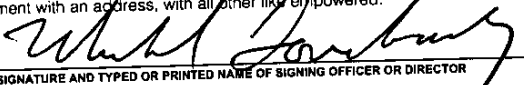


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90358 020 \*\*\*158.75

<b>DOCUMENT # P92000011887</b> 1. Entity Name <b>MICHAEL LOVELADY, INC.</b>																																																																																			
Principal Place of Business <b>3387 NW 151ST TER MIAMI, FL 33054</b>			Mailing Address <b>3387 NW 151ST TER MIAMI, FL 33054</b>																																																																																
2. Principal Place of Business <b>3357 NW 154 Terr.</b> <small>Suite, Apt. #, etc.</small>		3. Mailing Address <b>3357 NW 154 Terr.</b> <small>Suite, Apt. #, etc.</small>																																																																																	
City & State <b>MIAMI FL</b>		City & State <b>MIAMI FL</b>		4. FEI Number <b>65-0374403</b>																																																																															
Zip <b>33054</b>		Country <b>USA</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																																																																															
6. Name and Address of Current Registered Agent <b>LOVELADY, MICHAEL 3387 NW 151ST TER MIAMI, FL 33054</b>																																																																																			
7. Name and Address of New Registered Agent Name <b>Lovelady, Michael</b> Street Address (P.O. Box Number is Not Acceptable) <b>3357 NW 154 Terr.</b> City <b>MIAMI</b> State <b>FL</b> Zip Code <b>33054</b>																																																																																			
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  DATE <b>3/28/06</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>																																																																																			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																																																																																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>LOVELADY, MICHAEL</td> <td></td> <td>STREET ADDRESS</td> <td>3357 NW 154 Terr.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>3387 NW 151ST TER MIAMI, FL 33054</td> <td></td> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33054</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>LOVELADY, YVONNE</td> <td></td> <td>STREET ADDRESS</td> <td>3357 NW 154 Terr.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>3387 NW 151ST TER MIAMI, FL 33054</td> <td></td> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33054</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>T</td> <td></td> <td>STREET ADDRESS</td> <td>3357 NW 154 Terr.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>LOVELADY, BETTY</td> <td></td> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33054</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>3387 NW 151ST TER MIAMI, FL 33054</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	LOVELADY, MICHAEL		STREET ADDRESS	3357 NW 154 Terr.		CITY-ST-ZIP	3387 NW 151ST TER MIAMI, FL 33054		CITY-ST-ZIP	MIAMI, FL 33054		STREET ADDRESS	LOVELADY, YVONNE		STREET ADDRESS	3357 NW 154 Terr.		CITY-ST-ZIP	3387 NW 151ST TER MIAMI, FL 33054		CITY-ST-ZIP	MIAMI, FL 33054		STREET ADDRESS	T		STREET ADDRESS	3357 NW 154 Terr.		CITY-ST-ZIP	LOVELADY, BETTY		CITY-ST-ZIP	MIAMI, FL 33054		CITY-ST-ZIP	3387 NW 151ST TER MIAMI, FL 33054																												
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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:  DATE <b>3/28/06</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																			