

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000026351

FILED
May 01, 2006
Secretary of State

Entity Name: DUO CORPORATION

Current Principal Place of Business:

300 THREE ISLANDS BLVD
UNIT 610
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 198
WEST BRIDGEWATER, VT 05035

New Mailing Address:

FEI Number: 04-2589727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWSOME, ROBERT
300 THREE ISLANDS BLVD
UNIT 610
HALLANDALE, FL 33009 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: NEWSOME, ROBERT
Address: 300 THREE ISLANDS UNIT 610
City-St-Zip: HALLANDALE, FL 33009

Title: S () Delete
Name: NEWSOME, JUDY
Address: PO BOX 537
City-St-Zip: WOODSTOCK, VT 05091

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ROBERT NEWSOME

PRES

05/01/2006

Electronic Signature of Signing Officer or Director

Date