

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90355 044 \*\*\*158.75

<b>DOCUMENT # P93000046539</b> 1. Entity Name <b>JUNO BAY INVESTMENTS, INC.</b>											
Principal Place of Business <b>1014 BAY COLONY DR. SOUTH JUNO BEACH, FL 33408-2103</b>			Mailing Address <b>1014 BAY COLONY DR. SOUTH JUNO BEACH, FL 33408-2103</b>								
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.		<b>40073481</b> 							
City & State  Zip      Country		City & State  Zip      Country		4. FEI Number <b>65-0420535</b>							
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable							
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> <b>6. Name and Address of Current Registered Agent</b>   <b>VRBANEC, STEPHAN R 1015 BAY COLONY DR. SOUTH JUNO BEACH, FL 33408-2103</b> </td> <td colspan="3" style="padding: 5px;"> <b>7. Name and Address of New Registered Agent</b>          Name          Street Address (P.O. Box Number is Not Acceptable)          City      <b>FL</b>      Zip Code       </td> </tr> </table>						<b>6. Name and Address of Current Registered Agent</b>  <b>VRBANEC, STEPHAN R 1015 BAY COLONY DR. SOUTH JUNO BEACH, FL 33408-2103</b>			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</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>									
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>								
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPSD VRBANEC, STEPHEN R. 1015 BAY COLONY DR. SOUTH JUNO BEACH, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	STEPHAN R.							
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD BLUEMKE, DUANE 4885 HEWITTS POINT ROAD OCONOMOWOC, WI 53066		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change    Addition							
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change    Addition							
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change    Addition							
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change    Addition							
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change    Addition							
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.											
<b>SIGNATURE:</b> <i>Stephan R. Vrbanc</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>STEPHAN R. VRBANEC</b>			Date <b>4/26/06</b> Daytime Phone # <b>561.625.3511</b>								