


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000056834
 1. Entity Name
PREMIUM TRADING COMPANY OF TAMPA BAY, INC.



Principal Place of Business Mailing Address
5939 BAYVIEW CIR **5939 BAYVIEW CIR**
GULFPORT, FL 33707 US **GULFPORT, FL 33707 US**

DO NOT WRITE IN THIS SPACE



04212006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
59-3197809 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
SCHECT, NEIL S
3630 W. KENNEDY BLVD.
TAMPA, FL 33605

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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 _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000525545
 05/04/06--80038-009 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WILLIS, JAMIE
STREET ADDRESS	5939 BAYVIEW CIR
CITY-ST-ZIP	SAINT PETERSBURG, FL 33707
TITLE	D
NAME	WILLIS, GLEN
STREET ADDRESS	2239 CLIMBING IVY DR
CITY-ST-ZIP	TAMPA, FL 33624
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: JAMIE WILLIS 4/21/06 (813)882-0340
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #