2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P93000077452

1. Entity Name
SY'S SUPPLIES NORTH, INC.

Principal Place of Business	Mailing Address
341A THOR AVE SE	1489 N MILITARY TRAIL
SUITE 1	114
PALM BAY, FL 32909 US	WEST PALM BEACH, FL 33409 US

DO NOT WRITE IN THIS SPACE

04172006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-3222845	Not Applicable

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

6. Name and Address of Current Registered Agent

MARELL, WILLIAM J ESQ
1601 FORUM PLACE, STE 1101
WEST PALM BEACH, FL 33401

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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 _____

Signature, typed or printed name of registered agent and title if applicable.   (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

10.	OFFICERS AND DIRECTORS	
TITLE	D	
NAME	APPLEBAUM, SY	
STREET ADDRESS	235 N JOG RD	
CITY-ST-ZIP	WEST PALM BEACH, FL 33413	
TITLE	D	REMOVE
NAME	CHANCEY, DOUGLAS	
STREET ADDRESS	4780 US HWY 1	
CITY-ST-ZIP	GRANT, FL 32949	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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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: _S. APPLEBAUM_   _4/21/06_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #