## **2006 FOR PROFIT CORPORATION**

NAME STREET AUDRESS

## **FILED**

ANNUAL REPORT				Feb 15, 2006 08:00 AN			
1. Entity Name	MENT # P930000786 Lups corporation	97			Secre	tary of Stat	e
Principal Place 503 - 67TH S BRADENTON	STREET N.W.	Mailing Address 503 - 67TH STREET N.W. BRADENTON, FL 34209	·	* * * * * * * * * * * * * * * * * * *	FRIER MIR RELU REIM ROM	i dan inder jene dine una kreiner	
D	O NOT WRITE		CE	01142006 4. FEI Numbe 74-299		CR2E034 (11/05)  Applied Not Api  \$8.75 Addition Fee Required	pilcable
	6. Name and Address of Current Re DAVID M 4 STREET N.W. ON, FL 34209	gisterod Agent			NOT W		
the obligat	named entity submits this statement for the lons of registered agent.  Signature, apped or printed name of registered agent and R. NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	### # #PPFcable. (NOTE Register)  9. Election Campaign Final	ad Agent signeture required	<del></del>	h, in the State of Flo	rida. I am familiar with, and	accept
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE	P PHILLIPS, DAVID M 503 - 67TH STREET N.W. BRADENTON, FL 34209				IINDOU004 02/27/06-6 NOT W THIS SF	:0001-018 150.00 'RITE	)
STREET ADDRESS CITY-ST-ZIP							

12. I hereby cartify 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 807, 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.

ENCHATURE AND TYPED OR PRINTED HAVE OF SIGNING OFFICER OR DIRECTOR DOISE DESIDENT 2-13-96 941-792-6493 SIGNATURE: 2