

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 13, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P93000080984**



1. Entity Name  
**SPECIALTY SUPPLIES, INC.**

Principal Place of Business      Mailing Address  
**3410 PARK CENTRAL BLVD., N.**      **3410 PARK CENTRAL BLVD., N.**  
**POMPANO BEACH, FL 33064 US**      **POMPANO BEACH, FL 33064 US**



01062006    No Chg-P    CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0451154</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**ORETSKY, MITCHELL**  
**3410 PARK CENTRAL BLVD**  
**POMPANO BEACH, FL 33064**

**DO NOT WRITE  
IN THIS SPACE**

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: *Clifford Oretsky* **VP CLIFFORD ORETSKY 1-6-06**  
(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	P
NAME	ORETSKY, MITCHELL
STREET ADDRESS	3410 PARK CENTRAL BLVD.
CITY-ST-ZIP	POMPANO BEACH, FL
TITLE	VP
NAME	ORETSKY, CLIFFORD
STREET ADDRESS	3410 PARK CENTRAL BLVD., N.
CITY-ST-ZIP	POMPANO BEACH, FL
TITLE	VP
NAME	DESANTIS, JOSEPH
STREET ADDRESS	3410 PARK CENTRAL BLVD., N.
CITY-ST-ZIP	POMPANO BEACH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/18/06-80026-018 150.00

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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: *Clifford Oretsky* **CLIFFORD ORETSKY 1-6-06 954-968-2900**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #