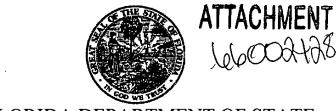
2006 FOR PROFIT CORPORATION ANNUAL REPORT

01-30-2006 90060 040 ***150.00 **DOCUMENT # P94000029635** PAUL G. REISS, INC. Principal Place of Business Mailing Address 1950 BLUE HERON WAY 1950 BLUE HERON WAY PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 2. Principal Place of Business Suite Act. #. etc. CR2E034 (11/05) 01182006 City & State Applied For 4. FE) Number HARRIOR 59-3243811 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired u. 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agen REISS, PAUL G 1950 BLUE HERON WAY PALM HARBOR, FL 34683 , i 8. The above named entity submits this statement for the purpose of changing its registered office the obligations of registe SIGNATURE. (NOTE: Registered Agent eigneture required when rematating) 9. Election Campaign Financing \$5.00 мау ве FiLE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 - Deleta TITLE TITLE REISS, PAUL G MANE 1950 BLUE HERON WAY STREET ADDRESS STREET ADDRESS PALM HARBOR, FL 34683 C17-51-21P CITY-ST-ZIP ☐ Addition MILE ☐ Detete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY.ST. 7P CITY-SI-ZIP Delete ☐ Change ☐ Addition TIFLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZP CITY-SI-ZIP Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY - 51 - 71P CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Detete NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Defete ☐ Change ■ Addition TITLE TITLE NAME MARIE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Floride 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:

FILED Feb 24, 2006 8:00 am

Secretary of State



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 2, 2006

PAUL G. REISS, INC. 129 CHARIT WY ROCHESTER, NY 14626

Subject: PAUL G. REISS, INC.

Reference Number:

P94000029635

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The registered agent must have a **Florida** street address.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm ANNUAL REPORTS SECTION