

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2006 8:00 am
Secretary of State

07-19-2006 90008 043 ***158.75

40100100



DOCUMENT # P95000006455 1. Entity Name PERSONAL BIBLE COVERS, INC.					
Principal Place of Business 9920 S.W. 88 ST. # J-101 MIAMI, FL 33176			Mailing Address 9920 S.W. 88 ST. # J-101 MIAMI, FL 33176		
2. Principal Place of Business 2920 SALAMANDER CREEK LN Suite, Apt. #, etc.		3. Mailing Address 2920 Salamander Creek Ln Suite, Apt. #, etc.			
City & State CHARLESTON SC		City & State CHARLESTON, SC		4. FEI Number 65-0559775	
Zip 29406-8059		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GOMEZ, HILDEBRANDO 9920 S.W. 88 ST. # J-101 MIAMI, FL 33176				7. Name and Address of New Registered Agent Name: TERESITA OTERO Street Address (P.O. Box Number is Not Acceptable): PROFESSIONAL BUSINESS ADVISORS INC 11401 SW 40 ST. #201 City: Miami FL 33165	
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: DATE: 7/7/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PT NAME GOMEZ, HILDEBRANDO STREET ADDRESS 9920 S.W. 88 ST., # J-101 CITY-ST-ZIP MIAMI, FL 33176	<input type="checkbox"/> Delete		TITLE PT NAME GOMEZ, HILDEBRANDO STREET ADDRESS 2920 SALAMANDER CREEK LANE CITY-ST-ZIP CHARLESTON, SC. 29406-8059	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE TS NAME GOMEZ, VICTORIA STREET ADDRESS 9920 S.W. 88 ST., # J-101 CITY-ST-ZIP MIAMI, FL 33176	<input type="checkbox"/> Delete		TITLE VS NAME Gomez, Victoria STREET ADDRESS 2920 SALAMANDER CREEK LANE CITY-ST-ZIP CHARLESTON, SC 29406-8059	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:			7/7/06 84353-4900 <small>Date Daytime Phone #</small>		

ATTACHMENT

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#P95000006455

Because of our
move to TN we did
not receive the
Renewal postcard.

Kindly, please remove
the penalty.

THANKS.
