

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000069516

FILED
Feb 16, 2006
Secretary of State

Entity Name: 2 PLEASE DISTRIBUTING, INC.

Current Principal Place of Business:

4905 34TH STREET S., # 369
ST. PETERSBURG, FL 33711 US

New Principal Place of Business:

7825 BOCA CIEGA DR
ST. PETERSBURG BEACH, FL 33706 US

Current Mailing Address:

4905 34TH STREET S., #369
ST PETERSBURG, FL 33711 US

New Mailing Address:

7825 BOCA CIEGA DR
ST PETERSBURG BEACH, FL 33706 US

FEI Number: 59-3336008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, SHERRI
4905 34TH STREET S., #369
ST. PETERSBURG, FL 33711 US

Name and Address of New Registered Agent:

WILLIAMS, SHERRI
7825 BOCA CIEGA DR
ST. PETERSBURG BEACH, FL 33706 US

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.

SIGNATURE: SHERRI WILLIAMS

02/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVTS () Delete
Name: SHERRI WILLIAMS,
Address: 4905 34TH STREET S, # 369
City-St-Zip: ST. PETERSBURG, FL 33711

Title: T () Delete
Name: GLADYSZACK, TINA
Address: 13438 N. 73RD AVE
City-St-Zip: SEMINOLE, FL 33776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTS (X) Change () Addition
Name: SHERRI WILLIAMS,
Address: 7825 BOCA CIEGA DR
City-St-Zip: ST. PETERSBURG BEACH, FL 33706

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERRI WILLIAMS

PRES

02/16/2006

Electronic Signature of Signing Officer or Director

Date