

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000070749 1. Entity Name GOOD DEALS APPLIANCES, INC.	
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Principal Place of Business 14680 - 4 S TAMAMI TRAIL FORT MYERS, FL 33912 US	Mailing Address 14680-4 S. TAMAMI TRAIL FT. MYERS, FL 33912
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01272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0691996	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6 Name and Address of Current Registered Agent LUMSDEN, DENNIS J 6719 WINKLER ROAD SUITE 121 FORT MYERS, FL 33919

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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 _____
Sign, date, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relocating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

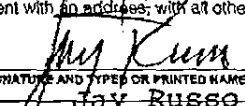
9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RUSSO, JAY R 1,040 MAHOGANY RUN FORT MYERS, FL 33913
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS RUSSO, SALVATORE 1,980 MAHOGANY RUN FORT MYERS, FL 33913
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IN THIS SPACE**

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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Jay Russo

3-22-06

Date Daytime Phone #