2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000082071

1. Entity Name
FOXTECH INTERNATIONAL, INC.



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

Principal Place of Business

Mailing Address

2125 S.E. ERWIN ROAD PORT ST. LUCIE, FL 34952 2125 S.E. ERWIN ROAD PORT ST. LUCIE, FL 34952



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

03142006 No Chg-P CR2E034 (11/05)

4. FEI Number | Applied For |
65-0741370 | Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DONOHUE, FRANCIS T 2125 S.E. ERWIN ROAD PORT ST. LUCIE, FL 34952

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 Signature, typed or printed paths of registered agent and ittle if applicable (NOTE Registered Agent)				required when revisiating)	DATE
	E NOWIII FEE IS \$150.00 by 1, 2006 Fee will be \$550.00	 Election Campaign Finan Trust Fund Contribution. 	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE MAME SIREET ADDRESS CITY-ST-ZIP	DCEO DONOHUE, FRANCIS T 2125 S.E. ERWIN ROAD PORT ST. LUCIE, FL 34952				U00000482838 04/11/06-80091-024 158.75
TEIRE NAME STREET ADDRESS CITY-ST-ZIP	OP DONOHUE, PATRICIA 2617 SE GOWIN RD PORT ST LUCIE, FL 34952				04/11/06-60031-024 136.(3
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP DONOHUE, JOYCE A 2125 SW ERWIN RD PORT SAINT LUCIE, FL 34952			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZP				in ⁻	THIS SPACE
ISTLE NAME STREET ADDRESS CHY-ST-DP					
THILE					

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 1.19, Florida Statutes, if 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 dath; 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: 4

STREET ADDRESS CITY-ST-ZIP

DANCIS TO PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/06

772-335.7562

Daytima Phone #