

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000032043
 1. Entity Name
 SPLASH SUNFUN BEACHWEAR, INC.



Principal Place of Business Mailing Address
 120 S US 41 BYPASS 120 S US 41 BYPASS
 VENICE, FL 34292 VENICE, FL 34292

DO NOT WRITE IN THIS SPACE



02032006 No Chg-P CR2E034 (11/05)

| | |
|---|---------------------------------------|
| 4. FEI Number 65-0751827 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent
 ROSENBERG, NOAH
 231 N TAMIAMI TR
 SARASOTA, FL 34236

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

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-STATE-ZIP | D ROSENBERG, NOAH 120 S US 41 BYPASS VENICE, FL 34292 |
| TITLE NAME STREET ADDRESS CITY-STATE-ZIP | D ROSENBERG, LILI 120 S US 41 BYPASS VENICE, FL 34292 |
| TITLE NAME STREET ADDRESS CITY-STATE-ZIP | |

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 02/22/06-80025-024 150.00

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 employees.

SIGNATURE: Lili Rosenberg - Lili ROSENBERG 1/31/06 941-3562578
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #