


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 20, 2006 08:00 AM
Secretary of State**

DOCUMENT # P97000033372 1. Entity Name SWEET ART & DESIGN, INC.			
Principal Place of Business 2054 TRADE CENTER WAY NAPLES, FL 34109		Mailing Address 420 SHARWOOD DRIVE NAPLES, FL 34110	
DO NOT WRITE IN THIS SPACE			
		02172006 No Chg-P CR2E034 (11/05)	
4. FEI Number 65-0744226		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 SWEET, DIANE L 420 SHARWOOD DRIVE NAPLES, FL 34110		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		<div>U00000442581 03/04/06-80023-019 150.00</div> DO NOT WRITE IN THIS SPACE	
TITLE P NAME SWEET, DIANE L STREET ADDRESS 420 SHARWOOD DRIVE CITY-ST-ZIP NAPLES, FL 34110			
TITLE V NAME BOLESKY, STACY M STREET ADDRESS 836 106TH AVE N CITY-ST-ZIP NAPLES, FL 34108			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 <i>DIANE LYNN SWEET</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <i>2-17-06</i> Daytime Phone #	