## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 07, 2006 08:00 AM Secretary of State

1. Entity Nan	IMENT # P970008810				v		
821 NORTH SUITE A	lus t	nailing Address B21 NORTH US 1 SUITE A ORMOND BEACH, FL 32174					
C	OO NOT WRITE II	CE	01092006 4. FEI Numbe 59-347		CR2E034 (		
821 NORT ORMOND	klians af registered agent.	DO NOT WRITE IN THIS SPACE red office or registered agent, or both, in the State of Florida. I am familiar with, and accept					
FIL After M	Signature, typed or printed name of registered agent and little  E NOWISS FEE 18 \$150.00  lay 1, 2006 Fee will be \$550.00			.00 May Be		OATE	
10.  (ISLE NAME STREET ADDRESS CITY-SI-ZIP  LILLE NAME STREET ADDRESS CITY-SI-ZIP  STREET ADDRESS CITY-SI-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE TITLE TITLE TITLE TITLE	P HEBERT, GERALD W 821 N. U.S. 1, SUITE A ORMOND BEACH, FL 32174 ST HEBERT, HELEN W 821 N. U.S. 1, SUITE A ORMOND BEACH, FL 32174	CTORS			000000 04/23/06- NOT W THIS SP	RITE	9 150.00
NAME	ļ						

12. I hereby certify that the information supplied with this filing does not quality 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 path; that I am an officer or director of the corporation or the receiver or pissee empowered to execute this regort 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 accuracy like empowered to execute this execute this regort as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes.

SIGNATURE:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4/4/06 386-677-623