2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000043351

1. Entity Name
ALL MICROGRAPHICS, INC.

Principal Place of Business	Mailing Address
7409 BLUE SKIES DRIVE SPRING HILL, FL 34606	7409 BLUE SKIES DRIVE SPRING HILL, FL 34606

01072006   No Chg-P   CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-1771130

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired   ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SVEHLA, DICK
7409 BLUE SKIES DRIVE
SPRING HILL, FL 34606

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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 name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   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	P
NAME	SVEHLA, DICK
STREET ADDRESS	7409 BLUE SKIES DR
CITY-ST-ZIP	SPRING HILL, FL 34606

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000383568
01/13/06-80006-013 150.00

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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: _RICHARD R. SVEHLA_ 1/7/06 352 684 1195
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #