2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Apr 28, 2006 08:00 AM Secretary of State

1. Entity Nam	MENT # P9800004787 PRANGE PARK, INC.	3					
Principal Place of Business 1910 WELLS RD #C-5 1371 PALMETTO PARK RD ORANGE PARK MALL ORANGE PARK, FL 32073				} A RR 33 88 1 (9	# (D):\$5 (4))) ## } ##	a walka wakan awana swal kwa	USA WINUSA TI IBRA
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				04262006 4. FEI Numb 59-351		CR2E034 (11/	Applied For Not Applicable Additional
SIEGEL, NAT 1371 PALMETTO PARK RD BOCA RATON, FL 33486			DO NOT WRITE IN THIS SPACE				
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, types or printed name of registered agent and title if explicable. (NOTE Registered Agent signature recuired when reinstating) DATE							
Fil. After M	E NOWIII FEE 13 \$150,00 ay 1, 2006 Fee will be \$550,00	ncing \$5.	.00 May Be ed to Fees				
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT P COSANTINO, JAMES A 4225 GENESSEE ST CHEEKTOWAPA, NY 14225	TORS			U00000 05/10/06-	542943 80117-020	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					NOT W		
NAME STREET ADDRESS CHY-ST-ZIP				111	THIS SF	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·					
TITLE NAME STREET ADURESS CITY-ST-ZIP							
12. I hereby of indicated of the cor changed.	ertify that the information supplied with this fi on this report or supplemental report is true a portation or the receiver or trustee ampowers or on an attachment with an address, with al	iling does not quality for the exe and accurate and that my signal I to execute this report as requir I other like empowered.	amptions contained ture shall have the s red by Chapter 607	i in Chapter 119 same legal effec , Florida Statute), Florida Statutes. I it as it made under cos; and that my name is; and that my name	further certify that to beth; that I am an off a appears in Block	he information licer or director 10 or Block 11 if

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