2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000069163

Entity Name: 888 KNIVES R US, INC.

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8727 PHILLPS HWY 405

JACKSONVILLE, FL 322568210

Current Mailing Address: New Mailing Address:

PO BOX 16952

JACKSONVILLE, FL 322456952

FEI Number: 59-3665262 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DOUGLAS, WILLIAMS C VP
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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.

SIGNATURE: DOUGLAS C WILLIAMS 04/26/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: (X) Change () Addition JOHNSON, LEONA WILLIAMS, DOUGLAS C P Name: Name: 207 EAST 16TH STREET 8025 BAYMEADOWS CIRCLE E Address: Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Delete Title: () Change () Addition

 Name:
 WILLIAMS, DOUGLAS C
 Name:

 Address:
 2285 COUNTY ROAD 220 #911
 Address:

 City-St-Zip:
 MIDDLEBURG, FL 32068
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS C. WILLIAMS P 04/26/2006