
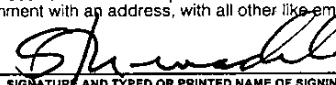


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 17, 2006 8:00 am**  
**Secretary of State**

03-17-2006 90142 036 \*\*\*150.00

<b>DOCUMENT # S70725</b> 1. Entity Name <b>THE JUPITER SCENERY COMPANY, INC.</b>					
Principal Place of Business <b>603 COMMERCE WAY W JUPITER, FL 33458</b>			Mailing Address <b>P.O BOX 7360 JUPITER, FL 33458</b>		
2. Principal Place of Business <b>15074 Park of Commerce Blvd.</b> Suite, Apt. #, etc. <b>#14</b>		3. Mailing Address <b>15074 Park of Commerce Blvd.</b> Suite, Apt. #, etc. <b>#14</b>			
City & State <b>Jupiter, FL</b>		City & State <b>Jupiter, FL</b>			
Zip <b>33478</b>		Country <b>USA</b>		Zip <b>33478</b>	
Country <b>USA</b>		4. FEI Number <b>65-0281929</b>			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>NORMANDALE, STEVEN J. 603 COMMERCE WAY W JUPITER, FL 33458</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>15074 Park of Commerce Blvd.</b> <b>Suite # 14</b> City <b>Jupiter</b> <b>FL</b> Zip Code <b>33478</b>		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>NORMANDALE, STEVEN J</b> <b>603 COMMERCE WAY W</b> <b>JUPITER, FL</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>15074 Park of Commerce Blvd.</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Suite #14</b> <b>Jupiter, FL 33478</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>NORMANDALE, STEVEN J.</b> <b>603 COMMERCE WAY W</b> <b>JUPITER, FL</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>15074 Park of Commerce Blvd.</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Suite #14</b> <b>Jupiter, FL 33478</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD</b> <b>NORMANDALE, SAMUEL C</b> <b>603 COMMERCE WAY WEST</b> <b>JUPITER, FL</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>15074 Park of Commerce Blvd.</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Suite # 14</b> <b>Jupiter, FL 33478</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>NORMANDALE, JAMES K</b> <b>603 COMMERCE WAY WEST</b> <b>JUPITER, FL</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>15074 Park of Commerce Blvd.</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Suite #14</b> <b>Jupiter, FL 33478</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
<b>SIGNATURE:</b> 			<b>Steven J. Normandale</b> <b>03/15/06</b> <b>561-776-6229</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		