


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2006 8:00 am
Secretary of State

02-16-2006 90043 035 ***150.00

DOCUMENT # V51599 1. Entity Name APPLE PRINTING & ADVERTISING SPECIALTIES, INC.	
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Principal Place of Business 5055 NW 10TH TERR. FT LAUDERDALE, FL 33309 US	Mailing Address 5055 NW 10TH TERR FT LAUDERDALE, FL 33309 US
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60016890



01182006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0346503	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DONATO, SEAN 5055 NW 10TH TERR #105 FT LAUDERDALE, FL 33309

**DO NOT WRITE
IN THIS SPACE**

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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	PDC
NAME	DONATO, SEAN
STREET ADDRESS	4460 NW 563 DR 7217 NW 64 th Terrace
CITY-ST-ZIP	COCONUT CREEK, FL 33007 Parkland FL 33067
TITLE	VD
NAME	DONATO, KEVIN
STREET ADDRESS	6846 NW 32ND ST
CITY-ST-ZIP	MARGATE, FL 33063
TITLE	TSD
NAME	KEVIN, DONATO
STREET ADDRESS	6846 NW 32 ST
CITY-ST-ZIP	MARGATE, FL 33063
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

Seantle A. Donato
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-06

Date

954-776-5691

Daytime Phone #