

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V58438

FILED  
Apr 17, 2006  
Secretary of State

Entity Name: FASHION BUG #2568, INC.

## Current Principal Place of Business:

2301 DELPRADO BLVD  
CAPE CORAL, FL 33990 US

## New Principal Place of Business:

## Current Mailing Address:

3750 STATE ROAD  
TAX COMPLIANCE  
BENSALEM, PA 19020 US

## New Mailing Address:

3750 STATE ROAD  
BSC TAX DEPT  
BENSALEM, PA 19020 US

FEI Number: 23-2697601      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SPECTER, ERIC  
Address: 450 WINDS LN  
City-St-Zip: BENSALEM, PA

Title: V ( ) Delete  
Name: SULLIVAN, JOHN J  
Address: 450 WINKS, LN  
City-St-Zip: BENSALEM, PA 19020

Title: VPD ( ) Delete  
Name: GLUECK, NEAL  
Address: 450 WINKS, LN  
City-St-Zip: BENSALEM, PA 19020

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DVP (X) Change ( ) Addition  
Name: SULLIVAN, JOHN J  
Address: 450 WINKS, LN  
City-St-Zip: BENSALEM, PA 19020

Title: DVP (X) Change ( ) Addition  
Name: GLUECK, NEAL  
Address: 3750 STATE RD  
City-St-Zip: BENSALEM, PA 19020

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: NEAL GLUECK

DVP

04/17/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date