

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 01, 2006  
Secretary of State**

DOCUMENT# F03000001880

Entity Name: AARGON AGENCY, INC.

**Current Principal Place of Business:**

3160 S. VALLEY VIEW #206  
LAS VEGAS, NV 89102

**New Principal Place of Business:**

**Current Mailing Address:**

3160 S. VALLEY VIEW #206  
LAS VEGAS, NV 89102

**New Mailing Address:**

FEI Number: 88-0354489      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEXISNEXIS DOCUMENT SOLUTIONS INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ST      ( ) Delete  
Name: CHRISTY, DUANE  
Address: 3112 ALCOA AVE.  
City-St-Zip: LAS VEGAS, NV 89102

Title: P      ( ) Delete  
Name: BOYCE, RITA  
Address: 6574 MESA VISTA  
City-St-Zip: LAS VEGAS, NV 89118

Title: V      ( ) Delete  
Name: BOYCE, MICHAEL  
Address: 6574 MESA VISTA  
City-St-Zip: LAS VEGAS, NV 89118

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: MICHAEL BOYCE

V

05/01/2006

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

\_\_\_\_\_  
Date