## 2006 FOR PROFIT CORPORATION

## FILED Apr 26, 2006 8:00 am Secretary of State 04-26-2006 90216 042 \*\*\*150.00

 ANNUAL REPORT	_
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**DOCUMENT # P03000150659** 1. Entity Name P3P TOOLS, INC. 40064433 Principal Place of Business Mailing Address 711 SOUTH OSPREY AVE 711 SOUTH OSPREY AVE SUITE 2 SUITE 2 SARASOTA, FL 34236 SARASOTA, FL 34236 2. Principal Place of Business Mailing Address 8297 118th Ave North 8297 118th Ave North Suite, Apt. #, etc. Suite, Apt. #, etc. 04112006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For Lárgo Florida Largo Florida 20-0483172 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired 33773 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ZITANI, GREGORY Street Address (P.O. Box Number is Not Acceptable) 4046 SAWYER RD. SARASOTA, FL 34233 City Zip Code FL 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 talls 4 applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CEO Change Addition TITLE CEO THTLE ☐ Delete MARTIN, STEPHEN NAME Martin, Stephen NAME STREET ADDRESS 4010 BURLWOOD ROAD STREET ADDRESS 8297 118th Ave North Largo, FL, 33773 CITY-ST-ZIP SARASOTA, FL 34233 CITY-ST-ZIP TITLE PRF ☐ Delete TITLE PRE. ☑ Change Addition Martin, Mara L. MARTIN, MARA L NAME NAME 8297 118th Ave North STREET ADDRESS STREET ADDRESS 4010 BURLWOOD ROAD CITY-ST-ZIP Largo, FL, 33773 CITY-ST-ZIP SARASOTA, FL 34233 TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITI F NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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 eath; 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. 04/23/2006 727-729-7538 Stephen Martin SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # Date