


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 09, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P19698**

1. Entity Name  
**COMMERCIAL INVESTMENTS INTERNATIONAL, INC.**



Principal Place of Business <b>173 HILLSIDE AVENUE P.O. BOX 384 WATERBURY, CT 06710</b>	Mailing Address <b>173 HILLSIDE AVENUE P.O. BOX 384 WATERBURY, CT 06720 US</b>
--	---

**DO NOT WRITE IN THIS SPACE**



02022006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>06-1071001</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

**BRUNEAU, ROBERT A.  
2039 BALBOA WAY  
KISSIMMEE, FL 32741**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

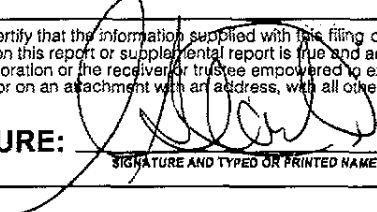
9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P TARTE, CONRAD 173 HILLSIDE AVENUE WATERBURY, CT</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVD TARTE, MICHAEL 3270 BRANDY LANE SAN JOSE, CA</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STD TARTE, DAVID 3270 BRANDY LANE SAN JOSE, CA</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

001000426083  
02/20/06-80030-009 150.00

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:**  **PRESIDENT CONRAD TARTE** **2/3/06** **203-574-5606**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **2/3/06** Daytime Phone # **203-574-5606**