2006 FOR PROFIT CORPORATION

ANNUAL REPORT FILED Mar 20, 2006 08:00 AM **DOCUMENT # 410851** 1. Entity Name **Secretary of State** EVERGREEN SPRINKLER SYSTEMS, INC. Principal Place of Business _Majiing Address 12515 SW 128 ST 12515 SW 128ST MIAMI, FL 33186-5419 US MIAMI, FL 33186-5419 US No Chg-P CR2E034 (11/05) 03152006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1418244 Not Applicat: \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FROST, RONALD DO NOT WRITE 12515 SW 128 ST MIAMI, FL 33186 IN THIS SPACE 3. 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. STONATURE Annual or putting a putting of legacines and and time says Alle a Transport 中世界是 机动 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 \$5.00 May Be After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS mle FROST, JOANN SEC/TRE NAME 1543 LANTANA CT. STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33326 VP TITLE U000000474118 NAME FROST, RICHARD VP 04/04/06-80010-017 150.00 STREET ADDRESS 14151 SW 152 PLACE CITY-ST-ZIP MIAMI, FL 33196 TITLE NAME FROST, TERRY VP STREET ADDRESS 11530 SW 105 TERRACE DO NOT WRITE CTTY-ST-ZIP MIAMI, FL 33176 TITLE IN THIS SPACE NAME FROST, RONALD STREET ADDRESS 1543 LANTANA CT FORT LAUDERDALE, FL 33326 CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I turther 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.

NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-SI-77

SIGNING OFFICER OR DIRECTOR

3/15/06 Date