2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J11846 FILED V.F. 36 HOLDINGS, INC. 05 MAR 30 MM ID: 58 Principal Place of Business Mailing Address TAIL SECRETA **BROAD & CASSEL BROAD & CASSEL** TALLAHASSEE, FLORIDA 7777 GLADES RD SUITE 300 7777 GLADES RD SUITE 300 BOCA RATON, FL 33434 BOCA RATON, FL 33434 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01102005 CR2E034 (10/03) Chq-P City & State City & State 4. FEI Number Applied For 59-2651724 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DEUTCH, JEFFREY A Street Address (P.O. Box Number is Not Acceptable) 7777 GLADES RD **STE 300** BOCA RATON, FL 33434 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE ☐ Delete TITLE ☐ Change Addition NAME POMERANTZ, ALICE NAME STREET ADDRESS 8600 DECARIE BLVD #200 STREET ADDRESS TOWN OF MOUNT ROYAL H4P 2N2, QC CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Change ☐ Delete Addition TITLE NAME GATTINGER, FRANKLIN J. NAME STREET ADDRESS 8600 DECARIE BLVD., SUITE 200 STREET ADDRESS CiTY-ST-7IP TOWN OF MOUNT ROYAL H4P 2N2, QC CITY-ST-ZIP TIT: F X Delete Change ☐ Addition ESPOSITO, RAPHAEL JR NAME NAME 900051615359 04/22/05--01008--003 **50 STREET ADDRESS 8600 DECARIE #200 STREET ADDRESS **5000.00 CITY-ST-ZIF MT ROYAL, QC, CANADA, CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition POMERANTZ, TERRY NAME NAME STREET ADDRESS 8600 DECARIE #200 STREET ADDRESS CITY-ST-ZIP MT ROYAL, QC, CANADA, CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition POMERANTZ, TERRY NAME MARKE STREET ADDRESS 8600 DECARIE #200 STREET ADDRESS CITY-ST-ZIP MT ROYAL, QC, CANADA, CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Terry Pomerantz

March 21st, 2005

Date