2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 16, 2007 8:00 am Secretary of State DOCUMENT # M11382 1. Entity Name 03-16-2007 90042 012 ***150.00 PICK-A-PLANT, INC. Principal Place of Business Mailing Address 726 NW 28 CT WILTON MANORS FL 33311 52 WEST OAKLAND PARK BLVD., #167 FT LAUDERDALE FL 93311 US 3. Mailing Address 2. Principal Place of Business - No P.O. Box # 300 EAST CAKIONS PK BIVD Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State Applied For 4. FEI Number 59-2500079 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FEINSTEIN, BARRY 726 NW 28 COURT Street Address (P.O. Box Number is Not Acceptable) FT-LAUDERDALE FL 33311 City Zip Code 8. The above named entity submits this state of Florida. I am familiar with, and accept the obligations of egistered agent FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change Addition TITLE Delete DILE GILMORE, DAVID NAME NAME 726 NW 28TH COURT STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33311 CHY-SI-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition FEINSTEIN, BARRY NAME NAM 726 NW 28TH COURT STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33311 CITY - ST - ZIP CITY - ST - 7IP Delete THE Channe ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY ST-74P TITLE Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP Addition Delete TITLE TITLE NAMI NAME STREET ADDRESS STREET ADDRESS CITY-ST ZIP CITY-SI-ZIP Delete DILE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY SI-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

FILED