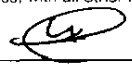


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90003 037 ***150.00

DOCUMENT # P01000038303 1. Entity Name THEODORE T. TARONE, JR., P.A.																																									
Principal Place of Business 180 ROYAL PALM WAY SUITE 201 PALM BEACH, FL 33480			Mailing Address 180 ROYAL PALM WAY SUITE 201 PALM BEACH, FL 33480																																						
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																							
City & State Zip		City & State Zip		4. FEI Number 65-1093467																																					
Country		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																					
6. Name and Address of Current Registered Agent TARONE, THEODORE T JR. 180 ROYAL PALM WAY SUITE 201 PALM BEACH, FL 33480				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																					
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																						
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">D TARONE, THEODORE T JR. 180 ROYAL PALM WAY, SUITE 201 PALM BEACH, FL 33480</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> </tr> </table>			TITLE	D TARONE, THEODORE T JR. 180 ROYAL PALM WAY, SUITE 201 PALM BEACH, FL 33480	☐ Delete	TITLE		☐ Delete	TITLE		☐ Delete	TITLE		☐ Delete	TITLE		☐ Delete	TITLE		☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> </table>			TITLE	NAME	☐ Change ☐ Addition	TITLE	NAME	☐ Change ☐ Addition	TITLE	NAME	☐ Change ☐ Addition	TITLE	NAME	☐ Change ☐ Addition	TITLE	NAME	☐ Change ☐ Addition	TITLE	NAME	☐ Change ☐ Addition
TITLE	D TARONE, THEODORE T JR. 180 ROYAL PALM WAY, SUITE 201 PALM BEACH, FL 33480	☐ Delete																																							
TITLE		☐ Delete																																							
TITLE		☐ Delete																																							
TITLE		☐ Delete																																							
TITLE		☐ Delete																																							
TITLE		☐ Delete																																							
TITLE	NAME	☐ Change ☐ Addition																																							
TITLE	NAME	☐ Change ☐ Addition																																							
TITLE	NAME	☐ Change ☐ Addition																																							
TITLE	NAME	☐ Change ☐ Addition																																							
TITLE	NAME	☐ Change ☐ Addition																																							
TITLE	NAME	☐ Change ☐ Addition																																							
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:  4-30-07 54 832 0272 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																									