2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jun 07, 2006 08:00 AM DOCUMENT # P94000048819 **Secretary of State** ALLÉN REALTY, INC. Principal Place of Business Mailing Address 9413 PALESTRO STREET 9413 PALESTRO STREET LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 No Chg-P CR2E034 (11/05) 06022006 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0508893 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent PEARL, ALLEN DO NOT WRITE 9413 PALESTRO STREET LAKE WORTH, FL 33467 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signalure required when remetation) DATE 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees Due by September 6, 2006 10. OFFICERS AND DIRECTORS TITLE PEARL, ALLEN NAME STREET ADDRESS 9413 PALESTRO ST. U00000566875 06/07/06-80002-009 150.00 CITY-ST-ZIP LAKE WORTH, FL 33467 TITI F NAME PEARL, SANDRA STREET ADDRESS 9413 PALESTRO ST. CITY-ST-ZIP LAKE WORTH, FL 33467 ITLE NAME STREET ADDRESS DO NOT WRITE CITY-SI-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CFTY-ST-ZIP me NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7IP 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 addices, with all other like empowered.

FILED