2005 FOR PROFIT CORPORATION ANNUAL REPORT

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SIGNATURE:

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GNATURE AND TYPED OR PRINTED NAME OF

Aug 05, 2005 08:00 AM Secretary of State DOCUMENT # P99000027906 1. Entity Name D & G MOBIL-TECH CORPORATION Principal Place of Business Mailing Address PO BOX 291392 PO BOX 291392 TAMPA, FL 33687 TAMPA, FL 33687 07182005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3578094 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent MANCUSO, GIUSEPPE DO NOT WRITE 7702 GULF COURT TAMPA, FL 33637 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. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 STATE OF THE STATE 10. OFFICERS AND DIRECTORS TITLE MANCUSO, GUISEPPE NAME STREET ADDRESS P.O. BOX 29051 - U00000375**70**4 TAMPA, FL 33687 CITY-ST-ZIP 08/0**5/**05-80006-005 150.00 TITLE MCDONALD, DAVID NAME STREET ADDRESS 8110 TOM SAWYER DR. CITY-ST-ZIP **TAMPA, FL 33637** TUTLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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

FILED

Daytime Phone #