2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 19, 2007 8:00 am Secretary of State DOCUMENT #H83048 04-19-2007 90179 035 ***150.00 SUNBELT MARKETING & DEVELOPMENT COMPANY Principal Place of Business Mailing Address 1014 ROYAL PASS ROAD 1014 ROYAL PASS ROAD TAMPA, FL 33602 US TAMPA, FL 33602 3. Mailing Address 4830 V 2. Principal Place of Business - No P.O. Box # 4830 WKenned Suite, Apt. #, etc. Suite, Apt. #, etc. 03132007 Chg-P CR2E034 (12/06) 250 City & State City & State 4. FEI Number Applied For Tampa 59-2607311 Not Applicable lampa Country Country \$8.75 Additional 5. Certificate of Status Desired USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEISSER, RONALD N Street Address (P.O. Box Number is Not Acceptable) 1014 ROYAL PASS ROAD TAMPA, FL 33602 City 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Squature, typed or printed name of registered agent and tale if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DPST TITLE ☐ Defete TITLE Change ☐ Addition WEISSER, RONALD No 1014 Royal Pass Rd WEISSER, RONALD N NAME NAME STREET ADDRESS 1014 ROYAL PASS ROAD STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33602** CITY-ST-7IP Addition TITS F Delete TITLE ☐ Change WEISSER JACK S #250 4830 W Kennedy Blue #250 NAME NAME STREET ADDRESS STREET ADDRESS 33609 CITY-ST-ZIP CITY-ST-ZIP Addition JID E Delete TITLE ☐ Change BERGSCHUEIDER, DAWN WEISSER 4830 W KENNEDY BLVD. #250 Tampa, FL 33609 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BULE Delete DILE ☐ Change Addition NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 attachmyst with an address, with all other like empowered. changed, or on an attachment with an address, with all other like empowe Jack Weisser SIGNATURE:

FILED