2006 FOR PROFIT CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 19, 2006 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT # 190686** 01-19-2006 90084 044 ***150.00 1. Entity Name BETHEL ISLE 3, INC. Principal Place of Business Mailing Address 2333 BRICKELL AVENUE APT. 1802 2333 BRICKELL AVENUE APT. 1802 MIAMI, FL 33129 MIAMI, FL 33129 01052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-2522308 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VAN BUSCH, PATRICIA DO NOT WRITE 2333 BRICKELL AVE. #1802 IN THIS SPACE MIAMI, FL 33129 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 signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE VAN BUSCH, PATRICIA NAME 2333 BRICKELL AVE. #1802 STREET ADDRESS MIAMI, FL CITY-ST-ZIP SD TITLE DAVISON, KATHLEEN NAME STREET ADDRESS STRUMENT IGGOS, BAYSHORE LANE MAMIBEAGRIPE MIAMI, FH. 33133 CITY-ST-ZIP TITLE 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 12. I hereby certify that the information supplied with this filing does not quality 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 reserver or mystee 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 attagriment, with an address, with all otiger like empowered.

FILED