2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED May 03, 2007 8:00 am Secretary of State **DOCUMENT # 209601** 1. Entity Namo 05-03-2007 90060 047 ***150.00 WARD CITY INC Principal Place of Business Mailing Address % GORDON HAAG & ELIZABETH % GORDON HAAG & ELIZABETH 169 N.W. 44TH ST. 169 N.W. 44TH ST. FT. LAUDERDALE FL 33309-0923 FT. LAUDERDALE FL 33309-0923 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-0837407 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HAAG, ELDON 169 NW 44 ST Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33309 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title r applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution, Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 HILE Delete TITLE ☐ Change ■ Addition HAAG, ELIZABETH J NAME NAME 4560 N.W. 3RD AVE. STREET ADDRESS STREET ADDRESS FORT LAUDERDALE, FL00000 CHY-ST-ZiP CITY-ST ZIP PSD ☐ Delete TITLE ☐ Change Addition HAAG, ELDON D NAME NAME 181 NW 45TH STREET STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33309 CITY-ST-7IP CITY-SI ZIP RIVE ☐ Delete TITLE Change Addition HAAG, GORDON E NAME STREET ADDRESS 4560 N.W. 3RD AVE. STREET ADDRESS CITY ST ZIP FORT LAUDERDALE FL 33309 CITY ST-ZIE HHE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY - ST - ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-SI-ZIP HILE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST - 71P CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Eldon Hoag, PRES.

4-18-07

954-776-5040