2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 16, 2006 08:00 AM Secretary of State **DOCUMENT #454550** 1. Entity Name RED SMITH OF FLORIDA, INC. Principal Place of Business Mailing Address 4145 SW 47TH AVE DAVIE, FL 33314 US 7100 56TH ST. PINELLAS PARK, FL 33787 02102006 No Cho-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1630278 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPATZ, CARL DO NOT WRITE 3400 SW 3RD AVENUE MIAMI, FL 33145 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 signature required when reinstelling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PD TIBLE NAME FOSTER, DAVID STRUCT ADDRESS 2800 W AVIARY DR CITY-ST-ZIP COOPER CITY, FL 33026 U00000437306 02/28/06-80035**-01**3 150.00 TITLE NAME FOSTER, STEPHEN STREET ADDRESS 2 PEBBLE BEACH DRIVE BEDFORD, NH 03110 CITY-ST-ZIP TITLE NAME STREET ACCRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS City-St-Zip TITLE HARRE STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 furstee 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:

CHTY-ST-ZIP

HAME STREET ADORESS CITY-ST-ZIP

954-581-1996

FILED