COLUMENT # 531166 Summary and State Summary of State Su	2006 FOR PROFIT CORPORATION ANNUAL REPORT				FILED Mar 13, 2006 08:00 AM	
800 H MAXINUA ANE SUITE 1500 (32803) PGLANED, FL 32802 PDD MOT WARDULA ARE SUITE 1500 (32803) OR ANDO, FL 32802 DO NOT WRITE IN THIS SPACE D2212006 No Chg.P CP2E004 (11/105) Contraction of the address of Current Registered Agent Activation of the address of Current Registered Agent Activation of the address of Current Registered Agent DEAN MEAD SERVICES, LLC GON NAGRON, FL 32803 Contraction of the address of Current Registered Agent DO NOT WRITE IN THIS SPACE DEAN MEAD SERVICES, LLC GON NAGRON, AVE, SUITE 1500 DO NOT WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE Image: ServiceS, LLC GON NAGRON, AVE, SUITE 1500 DO NOT WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE SIGMATURE Sigma and Address of Current Registered Agent DO NOT WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE BEAN MEAD SERVICES, LLC GON NAGRON AND, FL 32803 Bean MEAD SERVICES, LLC GON NAGRON AND, FL 32803 DO NOT WRITE IN THIS SPACE Image: ServiceS, LLC GON NAGRON AND, FL 32803 DO NOT WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE Image: ServiceS, LLC GON NAGRON AND ARE IN THIS SERVICES, LLC GON NAGRON AND ARE IN THIS SERVICES, LLC GON NAGRON AND ARE IN THIS SERVICES BOD NOT WRITE IN THIS SERVICES Image: ServiceS, Contraction Address of Current Registered of the address of registered agent. State of Feel State of Feel State of The Address of Current Registered Agent.	1. Enlity Name	0			Secretary o	f State
DO NOT WRITE IN THIS SPACE • TEI Number NOT APPLICABLE • Not Applicative • Conflicate of Status Desired • Stat Applicative • Conflicate of Status Desired • Stat Applicative • Conflicate of Status Desired • Stat Applicative • Conflicate of Status Desired • OfficeDes And Deserverent end end applicate Deservere desired • OfficeDes And Deserverent end end applicate Deserverent end	800 N MAGN P.O. BOX 234	OLIA AVE SUITE 1500 (32803) 46	800 N MAGNOLIA AVE SUITE 1500 (328 P.O. BOX 2346			
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bit obligations of registered agent. SIGNATURE Signalue. hybrid of privations of registered agent and life (applicable PTILE NOWHIT FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campelign Financing ThE PST MMK STRELADRES Intel OG ST. JOSEPH BLVD. CACHAPELLE, ROGER STRELADRES STRELADRES GATINEAU QUEBEC, CA J82199 TTLE D LACHAPELLE, ROGER STRELADRES GATINEAU QUEBEC, CA J82199 TTLE D CIT-ST-2P GATINEAU QUEBEC, CA J82199 TTLE NAME STRELADRES STRELADRES GIT-ST-2P TITLE NAME STRELADRES	800 N MAG	AD SERVICES, LLC SNOLIA AVE, SUITE 1500	gistered Agent	DO		
TITLE PST NMML LACHAPELLE, ROGER STREI ADDRESS 900 ST. JOSEPH BLVD. CITY-SI-2P GATINEAU QUEBEC, CA J82189 YMML LACHAPELLE, ROGER STREI ADDRESS 900 ST. JOSEPH BLVD. CITY-SI-2P GATINEAU QUEBEC, CA J82189 YTTLE RAMK STREI ADDRESS 900 ST. JOSEPH BLVD. CITY-SI-2P GATINEAU QUEBEC, CA J82189 YTTLE RAMK STREI ADDRESS DO NOT WRITE ITTLE IN THIS SPACE YTTLE NAMK STREI ADDRESS CITY-SI-2P YTTLE RAMK STREI ADDRESS CITY-SI-2P YTTLE IN THIS SPACE YTTLE NAMK STREI ADDRESS CITY-SI-2P YTTLE IN THIS SPACE	ihe obligati SIGNATURE _ FILI	CORS of registered agent. Signature, typed or printed name of registered agent and E NOWILL FEE IS \$150.00	Intel I applicable (NOTE: Registered Agent signal) 9. Election Campaign Financing	re required when reinstating) \$5,00 May Be	<u></u>	
LITI-51-2IP GATINEAU QUEBEC, CA j821s9 TILE NAME STREET ADDRESS GITY-ST-2IP TITLE NAME STREET ADDRESS GITY-ST-2IP	TITLE	PST LACHAPELLE, ROGER	RECTORS	<u> </u>	}	
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TALE	STREET ADDRESS CITY-ST-ZIP TITLE WAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	GATINEAU QUEBEC, CA 1821s9 D LACHAPELLE, ROGER 900 ST. JOSEPH BLVD.	· · · · · · · · · · · · · · · · · · ·			
 STREEL ADDRESS CITY-S1-ZP 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 reporties there 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 alterprinent with an otdoress, with all other like ampowered. 	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	GATINEAU QUEBEC, CA 1821s9 D LACHAPELLE, ROGER 900 ST. JOSEPH BLVD.	· · · · · · · · · · · · · · · · · · ·	IN	THIS SPACE	