2006 FOR PROFIT CORPORATION ANNUAL REPORT				FILED Apr 07, 2006 08:00 AM			
DOCUMENT # 829342 1. Entity Narrie COSGROVE ENTERPRISES, INC.				Secretary of State			
Principal Plac 16000 NW 4 MIAMI, FL 3	I9TH AVE.	ialling Address 16000 NW 49 AVE 11AMI, FL 33014 US	<u> </u>				
				03272006	No Chg-P	CR2E03	4 (11/05)
				4. FEI Number 39-0944			Applied For Not Applicable
					I Status Desired		8.75 Additional
	6. Name and Address of Current Regis	tered Agent					ee Required
16000 NW HIALEAH, 8. The above	named entity submits this statement for the p	purpose of changing its register	ed office or register	ed agent, or both	, in the State of Fig	orida. I am fa	millar with, and accept
the obligat	ions of registered agent.	_	_				
	Signature, typed or printed name of registered agent and title	fappicable, (NOTE Register	id Agent signature required	(when reinstating)		DATE	
Fil. After Ma	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	<ol> <li>Election Campaign Final Trust Fund Contribution.</li> </ol>		.00 May Be ed to Fees			
10. 1171.E	OFFICERS AND DIREC	CTORS	-	<b>.</b>			
NAME STREET ADDRESS CITY-ST-ZIP	ROGERS, GREGORY R. 16000 NW 49TH AVE HIALEAH, FL 33014						
717LE NAME STREET ADDRESS CITY-ST-ZIP	VPSD SHELTON, J. RANDALL 16000 NW 49TH AVE MIAMI, FL 33014	,			U00000 04/21/06-	495561 80015-0	12 150.00
TITLE HAME STREET ADDRESS CITY-ST-ZIP							
NTLE NAME STREET ADDRESS CITY-ST-ZIP							
TATLE NAME STREET AODRESS CITY -ST-ZIP		— <u>————————————————————————————————————</u>					
WILE NAME STREET ADDRESS CITY-S1-21P							
12. I hereby c indicated of the con changed,	writing that the information supplied with this fi on this report or supplemental report is true a position of the receiver or trustee empowered or on an attachment with an address, with all	ing does not qualify for the exi ind accurate and that my signal to execute this report as requi other like empowered.	emptions contained lure shall have the s red by Chapter 607	In Chapter 119, same legal effect Florida Statutes	Florida Statutes. I as if made under ( ; and that my name	further certify bath; that I am appears in E	that the information an officer or director Block 10 or Block 11 If
SIGNAL	URE: AND THE DOTTINUED	R.G. Rogens	01	3 27	06 Dette		623 6700

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