2906 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
TIAN MANTZN PRESIDENT

DOCUMENT # F03000004429 1. Entity Name										
EXACTCOST, INC.								LED	·	
Principal Place of Business Mailing Address				- Andrews		•	06 MAR	-2 Pi 3	F 3l;	
1920 E HALLANDALE BCH BLVD. STE 704 HALLANDALE BEACH FL 33009 1920 E HALLANDALE BEACH FL 33009 1920 E HALLANDALE BEACH FL)4		SECHLI			
2. Principal Pl	ace of Business	3. Mailing Address				1188	13 59 1411 40100 11111 60 1111	92141 82111 83 111 83111	DINI KIDIN IINK IÆ	<u> </u>
Suite, Apt. #, etc.		Suite, Apt. #, etc.				1st MOORE CR2E034 (10/05)				
City & State		City & State				4. FEI Numb	er 33-08628	368	No	plied For t Applicable
Zip	Country	Zip Co		try		5. Certificate	of Status Desire	ed 🗌	\$8.75 Add Fee Required	
6. Name and Address of Current Registered Agent				-		7. Name and	Address of Ne	w Registered	Agent	***************************************
PENINSULA REGISTERED AGENTS, INC. 200 SOUTH BISCAYNE BLVD., 43RD FLOOR MIAMI FL 33131				Street Add	lress (F		ion Syste er is Not Accept and Road			
				City	Pla	ntation		FL	Zip Code 33324	9
8. The above named entity submits this statement for the purpose of changing its regis tratific Appropriate agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE SIGNATURE SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 After May 1, 2006 Fee Will Be \$550.00 Added to Fees								00 May Be		
Make Check Payable to Florida Department of State						. <u></u>				
10.	OFFICERS AND	DIRECTORS Defete	11.	. 1		ADDITIONS	/CHANGES TO	OFFICERS ANI	D DIRECTOR:	S IN 11
NAME STREET ADDRESS CITY-ST-ZIP	BOLLESS, YOSSI 1920 EAST HALLANDALE BEACH BLVD., STE 704 HALLANDALE BEACH FL 33009		NAM STRF			9 0 03/16	00067 7060101	9734 7018		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete ZEFFREN, MIRA 1920 EAST HALLANDALE BEACH BLVD., STE 704 HALLANDALE BEACH FL 33009			1					☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	PD MINTZ, ILAN 1920 EAST HALLANDALE BEACH HALLANDALE BEACH FL 33009	Delete Delete		-1			-	, ,	□ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	S HADAR, ZVI 1920 EAST HALLANDALE BEACH HALLANDALE BEACH FL 33009	□ Delete		- 1					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUDOMIRSKY, ACHI 1920 EAST HALLANDALE BEACH HALLANDALE BEACH FL 33009	☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete BEN-NUN, AVIHU 1920 EAST HALLANDALE BEACH BLVD., STE 704 HALLANDALE BEACH FL 33009		1						Change	Addition
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										