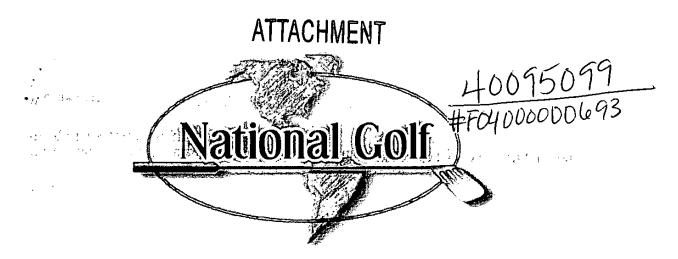
2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jun 08, 2006 8:00 am **Secretary of State** DOCUMENT # F04000000693 1. Entity Name 06-08-2006 90002 002 ***150.00 NATIONAL GOLF BUILDERS, INC. Principal Place of Business Mailing Address 11032 N. 52ND STREET SCOTTSDALE AZ 85254 11032 N. 52ND STREET SCOTTSDALE AZ 85254 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State 4. FEI Number City & State Applied For 73-1630998 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 firle it applicable (NOTE: Registered Agent signature required when remotation) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 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 TITLE ☐ Delete ☐ Change Addition NAME FREUND, RONALD J NAME STREET ADDRESS STREET ADDRESS 11032 N. 52ND STREET CITY-ST-ZIP SCOTTSDALE AZ 85254 CITY-ST-7IP Delete TITLE TITLE Change ☐ Addition NAME VELAZQUEZ, CARLOS NAME STREET ADDRESS 11032 N. 52ND STREET STREET ADDRESS CITY-ST-ZIP SCOTTSDALE AZ 85254 CITY-ST-ZIP ☐ Delete ☐ Addition NAME TAYLOR, RANDY E STREET ADDRESS 11032 N. 52ND STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SCOTTSDALE AZ 85254 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-ST-ZIP Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not quality 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 rustee empowers 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:

FILED



June 2, 2006

Division of Corporations Annual Report Section PO Box 6850 Tallahassee FL 32314

Ref: Request to Waive Late Fee

To Whom It May Concern:

We are respectfully requesting the late fee be waived.

Thank you for your consideration,

Randy Taylor

Secretary