Feb 27, 2006 8:00 am 2006 FOR PROFIT CORPORATION Secretary of State ANNUAL REPORT 02-27-2006 90062 037 ***150.00 DOCUMENT # F05000000003 1. Entity Name GCAFE, INC. Principal Place of Business Mailing Address 3137 HARWICK DRIVE 3137 HARWICK DRIVE BIRMINGHAM, AL 35242 BIRMINGHAM, AL 35242 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. 01162006 CR2E034 (11/05) 2114 Eagle Ridge Dr. 4. FEI Number Applied For 20-2043118 Not Applicable \$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 NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 JOHNSON AVE 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. VČVP Change Delete TITLE TITLE NORDEN, T. N. 2114 Eagle Ridge Drive NORDEN, T.N. NAME NAME 3137 HARWICK DRIVE STREET ADDRESS STREET ADDRESS Birmingham AL 35242 BIRMINGHAM, AL 35242 CITY-ST-ZIP CITY-ST-ZIP Change Delete TITLE ☐ Addition TITLE HANNAM, STEVEN HANNA, STEVEN NAME NAME 2114 Eagle Ridge Drive 4914 WINDWOOD CIRCLE STREET ADDRESS STREET ADDRESS Birmingham AL 35242 BIRMINGHAM, AL 35242 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition HANNA, STEVEN NAME NAME STREET ADDRESS 4914 WINDWOOD CIRCLE STREET ADDRESS BIRMINGHAM, AL 35242 CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 trustee 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:

Steve A Hanna SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR