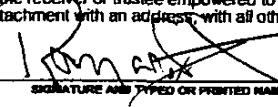


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007 8:00 am
Secretary of State

01-25-2007 90046 032 ***150.00

DOCUMENT # F26337 1. Entity Name EQUITY INVESTMENTS & MANAGEMENT, INC.					
Principal Place of Business % ROYALD A. ZELL 4908 WEST NASSAU STREET TAMPA, FL 33607			Mailing Address PO BOX 271352 TAMPA, FL 33688 US		
2. Principal Place of Business - No P.O. Box # 2225 Climbing Ivy Drive		3. Mailing Address Suite, Apt. #, etc.			
City & State Tampa, FL		City & State Suite, Apt. #, etc.			
Zip 33618		Country USA		4. FEI Number 59-2132493	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ZELL, ROYALD A. 4908 WEST NASSAU ST. TAMPA, FL 33607			7. Name and Address of New Registered Agent Name Agent the Same Street Address (P.O. Box Number is Not Acceptable) 2225 Climbing Ivy Drive City Tampa		
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 title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZELL, ROYALD A 4908 W NASSAU ST TAMPA, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P - the same 2225 Climbing Ivy Drive Tampa, FL 33618	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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 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:  Royald A. Zell (813) 954-7436					