2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # F66851 06 SEP 22 PH 1: 12 SCHÉIBLE BROKERAGE CO. JE JITLIANY OF STATE FALLAMAS TE, FLORIDA Principal Place of Business Mailing Address 1905 S 25TH STREET 1905 S 25TH STREET SUITE 202 SUITE 202 FORT PIERCE, FL 34947 FORT PIERCE, FL 34947 US 09052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2159205 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHEIBLE III, FRANK S DO NOT WRITE 1905 SOUTH 25TH STREET SUITE 202 IN THIS SPACE FT. PIERCE, FL 34947 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 10. OFFICERS AND DIRECTORS TITLE 500080270005 09/28/06--01053--019 **150.00 NAME SCHEIBLE III, FRANK S STREET ADDRESS 1905 S 25TH STREET CITY-ST-ZIP FT PIERCE, FL 0, ST TITLE SCHEIBLE, BETH A. NAME STREET ADDRESS 1905 S 25TH STREET CITY-ST-ZIP FT PIERCE, FL IMF NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

Frank P. Pehare Frank S. Schobe

9/20/06

941-778-3338