2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Jan 18, 2006 08:00 AM DOCUMENT # F91690 **Secretary of State** HUGO H. DE BEAUBIEN, P.A. Principal Place of Business Mailing Address P 0 B0X 87 332 NORTH MAGNOLIA AVE ORLANDO, FL 32801 US ORLANDO, FL 32801 01132006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2206388 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DE BEAUBIEN, HUGO H. DO NOT WRITE 332 N MAGNOLIA AVE ORLANDO, FL 32801 IN THIS SPACE 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 (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution, Added to Fees 10. OFFICERS AND DIRECTORS TITLE **PSTD** DE BEAUBIEN, HUGO H STREET ADDRESS 332 N MAGNOLIA AVE U00000330227 01/23/06-80013-007 158.75 CITY-ST-ZIP ORLANDO, FL 32801 MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-St-719 TITLE STREET ADDRESS CITY-ST-ZIP tion supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information blemental report is true and according and that my signature shall have the same legal effect as it made under oath; that I am an officer or director er or trusted employment to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the informating indicated on this report or support of the corporation or the registranged, or on an attachment

FILED