2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2008 08:00 AN Secretary of State DOCUMENT # F9200000161 1. Entity Name CO-COUNSEL, C.S.W., P.C. Principal Place of Business Mailing Address 142 WEST END AVE 1816 MONTE CARLO WAY # 1P CORAL SPRINGS, FL 33071 US NEW YORK, NY 10023 US CR2E034 (11/05) 04202008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-3518508 Not Applicab \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COHEN, PHYLLIS DO NOT WRITE 1816 MONTE CARLO WAY CORAL SPRINGS, FL 33071 IN THIS SPACE statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accep 8. The above named e the obligations SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. NAME COHEN, PHYLLIS 1816 MONTE CARLO WAY STREET ADDRESS 800000929215 05/21/08-80059-016 150.00 CITY-ST-ZIP CORAL SPRINGS, FL TITLE NAME 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 NAME STREET ADDRESS

FILED

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 suppliemental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the corporat changed, or on an attachment with an address, with all other like empowered.

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