2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 15, 2006 08:00 AM Secretary of State **DOCUMENT # F97000002669** ROCON REAL ESTATE, INC. Principal Place of Business Mailing Address 1562 LANDINGS TERR. 1562 LANDINGS TERR. SARASOTA, FL 34231 SARASOTA, FL 34231 No Chg-P CR2E034 (11/05) 01252006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 36-3746396 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent O'CONNOR, PRASAN K DO NOT WRITE 1562 LANDINGS TERR. SARASOTA, FL 34231 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable INOTE Registered Agent signature required when reinstating) DATE \$5,00 May Be 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE O'CONNOR, PRASAN K NASSE STREET AUDRESS 1562 LANDINGS TERR. SARASOTA, FL 34231 CHY-ST-DP TITLE MAME STREET ADDRESS CITY-ST-DP 7171.2 NAME STREET ADDRESS DO NOT WRITE Coty-St-Zo IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZOP NAME STREET ADDRESS

12. Thereby 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: France

City-St-Zip
Title
NAME
SIBLED ADDRESS
CITY-ST-Zip

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAND OFFICER OR DIRECTOR

2/11/06

41) 22:5449

FILED

Daytime Phone #