## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2007 08:00 AM Secretary of State

1. Entity Nan	MENT # G18935 CKLE, INC.				Se	creta	ry of Stat	
Principal Place of Business 228 COMMERCIAL BLVD. LAUDERDALE-BY-THE-SEA, FL 33308		Mailing Address 228 COMMERCIAL BLVD. LAUDERDALE-BY-THE-SEA, FL	. 33308		II KARI ITKIR JULIAR IIIDI ANI DANI DANI DANI		ITƏN ƏNƏM ERATA ƏNƏNCƏN IN AERI	
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	O NOT WRITE I	N THIC COA	OF TO	04182007	No Chg-P	CR2E034		
				4. FEI Numb 59-226			Applied For Not Applicable	
	The state of the s			5. Certificate	of Status Desired		3.75 Additional Required	
id 'n '' 1 ''ddings	6. Name and Address of Current Regi	stered Agent		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4 - 14 - 4	tr, Cr	P	
4530 NOF	, GORDON G. RTH FEDERAL HIGHWAY JDERDALE, FL 33308			3, 59	NOT WI			
	Signature, typed or printed name of registered agent and tritice in the second	e il application (NOTE: Registere  9. Election Campaign Finar Trust Fund Contribution.		d when reinstating) .00 May Be	U000007 05/01/07-8		18 150,00	
10.	OFFICERS AND DIRE	CTORS		1				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COPELAND, GEORGE A. 2137 N.E. 64TH ST. FT. LAUDERDALE, FL						ne selection of the	
NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP			The second of th	Þø	NOT WI	RITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS SP	ACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		•						

12. Thereby 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE: GROUPE OR PRINTED MARE OF SIGNING OFFICER OR DIRECTOR COPE & COPE & 4/19/09

NAME
STREET ADDRESS
CITY-ST-ZIP