2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 21, 2006 08:00 AM Secretary of State DOCUMENT # H25425 ANTHONY R. LILLICH, INC. Mailing Address Principal Place of Business C/O ANTHONY R. LILLICH C/O ANTHONY R. LILLICH 1671 E. GRANDVIEW BLVD. 1671 E. GRANDVIEW BLVD. KISSIMMEE, FL 34744-6619 KISSIMMEE, FL 34744-6619 03312008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 30-8528518 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 77 Fee Required 6. Name and Address of Current Registered Agent LILLICH, ANTHONY R. DO NOT WRITE 1671 E. GRANDVIEW BLVD. KISSIMMEE, FL 32741 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 eccept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if emplicable DATE PACTE: Registered Agent rightships required when reinstating FILE NOWIII FER IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 18 me NAME LILLICH, ANTHONY R. 1677 E. GRANDVIEW BL. STREET ADDRESS KISSIMMEE, FL'. CITY-ST-77P TITLE 05/03/06-80036-019 150.00 NAME STREET ADDRESS CITY-ST-ZIP me NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET AUTORESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CSTY-ST-ZIP TITLE MASSE

12. Thereby certify that the information supplied with this filling does not quality 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 it made under oath; that I am an officer or director of the corporation of 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:

STREET ADDRESS CITY-ST-ZIP

CHATURE AND THE ON PRINTED HANDS OF SIGNING OFFICER OR OMECTOR

4-3-2006

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FILED