2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 28, 2005 8:00 am Secretary of State DOCUMENT # H50601 Entity Name D. TOFFEL, INC. 04-28-2005 90150 028 ***158.75 Principal Place of Business Mailing Address 15159 101 ST TERR. N. P.O. BOX 7442 • 023 JUPITER, FL 33478 JUPITER, FL 33468-7442 US 2. Principal Place of Business 3. Mailing Address 9317 SE Mystic Cove T P.O. Box 2004 Suite, Apt. #, etc. Suite, Apt. #, etc. 03252005 CR2E034 (10/03) Cho-P City & State City & State 4. FEI Number Applied For Hobe Sound F) Hobe Sound, Fl. 59-2530538 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33455 33475 Martin Martin 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Toffel, Don TOFFEL, DON Street Address (P.O. Box Number is Not Acceptable) 15159 101ST TERR N JUPITER, FL 33478 9317 SE Mystic Cove Terr. Hobe Sound 33455 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. 4/25/05 Don Toffel d agent and tide if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Defete TITLE TOFFEL, DON 9317 S.E. MYSTIC COVE TERR. HOBE SOUND, FL. 33455 TOFFEL, DON NAME NAME STREET ADDRESS 15159 101ST TERR N STREET ADDRESS CITY-ST-ZIF JUPITER, FL 33478 CITY-ST-ZIP Addition TITLE ☐ Defete TITLE TOFFEL, OLITA 9317 S.E. MYSTIC COVE TERR. HOBE SOUND, FL. 33455 NAME TOFFEL, OLITA NAME STREET ADDRESS 15159 101ST TERR N. STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33478 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE RUMBAKS, RAY 9317 S.E. MYSTIC COVE TERR. HOBE SOUND, FL. 33455 RUMBAKS, RAIMOND NAME MAME 15159 101 TERR N. STREET ADDRESS STREET ADDRESS JUPITER, FL 33478 CITY-ST-70P CITY-ST-ZIP ☐ Change Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TILLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZP/ IIILE ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 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:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED