2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J46320

1. Entity Name
PTC ENTERPRISES, INC.

Principal Place of Business

Mailing Address

420 S. ORANGE AVE. STE. 1200 P. O. BOX 231

ORLANDO, FL 32801

ORLANDO, FL 32802-0231 US

FILED Jan 25, 2007 08:00 AM Secretary of State



 \Box

DATE

U00000602327 01/26/07-80085-006 150.00

DO NOT WRITE IN THIS SPACE

01212007 No Chg-P CR2E034 (11/05)

4 FFI Number | Applied For

4. FEI Number 59-2873222

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

CHRISTIANSEN, PATRICK T. 420 S. ORANGE AVE. ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

DO NOT WRITE

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.

(NOTE, Registered Agent signature required when reinstating)

FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DPTS

NAME CHRISTIANSEN, PATRICK T.

NAME CHRISTIANSEN, PATRICK T.
STREET ADDRESS
CITY-ST-2IP
ORLANDO, FL 32801

TITLE
NAME
STREET ADDRESS

CITY-SI-ZIP
TITLE
NAME
STREET ADDRESS

SIGNATURE

4

CITY-ST-ZIP
TILE
NAME
STREET ADDRESS

CITY-ST-ZIP TITLE

NAME STREET ADDRESS CITY-S1-ZIP

TITLE NAME STREET ADD

STREET ADDRESS

12. I hereby 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 supplementaries ont 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 trusteer impowered 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 a signature shall be empowered.

SIGNATURE:

SUNATINE AND TYPED OR DOWNED NAME OF SYDNING OFFICER OR PURECTOR

1/22/07 40)-423-400