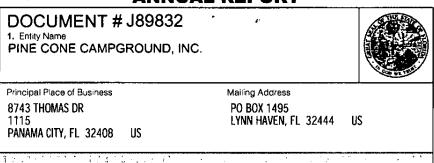
2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 08, 2008 08:00 AN Secretary of State





04092008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0003524 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE TASSONE, JOYCE 8743 THOMAS DR IN THIS SPACE PANAMA CITY, FL 32408 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, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS TASSONE, JOYCE STREET ADDRESS 8743 THOMAS DR 1115 CITY-ST-ZIP PANAMA CITY, FL 32408 DV POWELL, THERESA STREET ADDRESS 282 NEW SALEM RD CITY-ST-ZIP GRIFFIN, GA 30223 STREET ADDRESS DO NOT WRITE CITY-ST-ZIP

12. I hereby 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.

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TITLE

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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

JOYCE TASSONE

IN THIS SPACE