


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90828 011 ***150.00

DOCUMENT # K80787 1. Entity Name AERIE CONCEPT DEVELOPMENT, INC.	
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Principal Place of Business % 2541 NE 22 TERR FORT LAUDERDALE, FL 33305 22 - 62 SE 10th Street Deerfield Bch, FL 33441	Mailing Address % 2541 NE 22 TERR FORT LAUDERDALE, FL 33305
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40092563



01182007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0167200	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GREENWALD, STEVEN I. ESQ
6971 N FEDERAL HWY
SUITE 105
BOCA RATON, FL 33431

**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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP TOMKINS, LEIGHTON RAY JR 2541 NE 22 TERRACE FORT LAUDERDALE, FL 33305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TOMKINS, CAROLINE 2541 NE 22 TERRACE FORT LAUDERDALE, FL 33305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST TOMKINS, DEBRA 2541 NE 22 TERRACE FORT LAUDERDALE, FL 33305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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.

SIGNATURE: Debra Tomkins Debra Tomkins 4/23/07 954-566-4559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #