2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 17, 2006 08:00 AM **Secretary of State** DOCUMENT # K86588 1. Entity Name W. W. DAYTAN, INC. Principal Place of Business Mailing Address 608 SOUTHWEST 76 TERRACE 608 SOUTHWEST 76 TERRACE NORTH LAUDERDALE, FL 33068 NORTH LAUDERDALE, FL 33068 US US 03142006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0229372 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COLLAZO, WILLIAM DO NOT WRITE 608 SW 76TH TERRACE N. LAUDERDALE, FL 33068 IN THIS SPACE 6. 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 lamiliar with, and accept the obligations of registered agent. 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, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE מק COLLAZO, WILLIAM NAME STREET ADDRESS 608 SW 78TH TERRACE CITY-ST-ITP N. LAUDERDALE, FL. TITLE NAME STREET ADDRESS 1100000472303 00.00 111 150.00 P0031-011 CITY-ST-ZIP TITLE NAME STREET ACCRESS DO NOT WRITE CHY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 3373 F NAME STREET ADDRESS CITY-ST-ZIP NAME

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 cath; 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: &

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-06

FILED