2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 09, 2006 08:00 AM DOCUMENT # K88093 Secretary of State 1. Entity Name TINIMAR, INC. Principal Place of Business Mailing Address 3101 NORTH HIGHWAY A1A 3101 NORTH HIGHWAY A1A INDIALANTIC, FL 32903 INDIALANTIC, FL 32903 01032006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2948640 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent TELEMACHOS, NICHOLAS DO NOT WRITE 3101 N. HWY A1A INDIALANTIC, FL 32903 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 H00000379256 Trust Fund Contribution. Added to Fees 01/10/08-80013-019 150.00 OFFICERS AND DIRECTORS 10, TITLE D/P NAME TELEMACHOS, NICHOLAS STREET ADDRESS 3101 N. HWY A1A CITY-ST-ZIP INDIALANTIC, FL D TELEMACHOS, NICHOLE NAME STREET ADORESS 3101 N. HWY A1A CITY-ST-ZIP INDIALANTIC, FL D TITLE NAME TELEMACHOS, CHRISTINA STREET ADDRESS 148 LANSING ISLAND DR DO NOT WRITE CITY - ST - ZIP INDIAN HARBOUR BEACH, FL TITLE IN THIS SPACE NAME TELEMACHOS, MARIA STREET ADDRESS 148 LANSING ISLAND DRIVE CITY-ST-ZIP INDIAN HARBOUR BEACH, FL TITLE NAME STREET ADDRESS 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.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Nicholas Telemackø