2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 23, 2006 08:00 AM **DOCUMENT # L31724 Secretary of State** ANCELL INVESTMENT CORPORATION Malling Address Principal Place of Business 5381 EAST LEITNER DRIVE 2460 NW 17TH LANE CORAL SPRINGS, FL 33067 UNIT 4 POMPANO BEACH, FL 33064 US 01182006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2978575 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANCELL, MARIA-STELLA DO NOT WRITE 5381 EAST LEITNER DRIVE PARKLAND, FL 33067 IN THIS SPACE 3. 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 territian with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of régistered agent and title it applicable 9. Election Campaign Financing \$5.00 May Be FILE NOWR! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE ANCELL, GEOFFREY E NAME STREET ADDRESS 5381 EAST LEITNER DRIVE U00000397003 01/30/08-800**32-004** 1**58.75** CORAL SPRINGS, FL 33067 CITY-51-ZIP TITLE ANCELL, MARIA-STELLA NAME STREET ADDRESS 5381 EAST LEITNER DRIVE CORAL SPRINGS, FL | 33067 CITY-ST-DP NAME STREET ADDRESS DO NOT WRITE City-St-Zie IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-202 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.

SHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

954-2270600