2006 FOR PROFIT CORPORAȚION ANNUAL REPORT

FILED Mar 16, 2006 08:00 AM DOCUMENT # L47721 **Secretary of State** 1. Entity Name ROSE PEKRUL, P.A. Principal Place of Business Mailing Address C/O ROSE PEKRUL C/O ROSE PEKRUL 13180 NORTH CLEVELAND AVENUE #218 13180 NORTH CLEVELAND AVENUE #218 NORTH FORT MYERS, FL 33903 NORTH FORT MYERS, FL 33903 No Chg-P CR2E034 (11/05) 03072006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0166859 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PEKRUL, ROSE DO NOT WRITE 1431 SE 18TH TERR CAPE CORAL, FL 33990 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 eccept 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) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME PEKRUL, ROSE STREET ADDRESS 1431 SE 18TH TERRACE CITY-ST-ZIP CAPE CORAL, FL 33990 000000463420 03/25/06-80027-622 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CCTY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

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:

TITLE
NAME
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TITLE
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PAGE PLY LAND TYPED OR PRINTED NAME OF SIG

ruh .

3/13/66 239-997-4717 Date Dayline Phone #