2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 26, 2007 08:00 A Secretary of State DOCUMENT # L51904 LOUIS B. VOCELLE, JR., P.A. Bernard Commence of the Annual Commence of Principal Place of Business Mailing Address 3333-20TH ST 3333-20TH ST VERO BEACH, FL 32960 VERO BEACH, FL 32960 No Chg-P 03222007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0179153 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VOCELLE, LOUIS B. DO NOT WRITE 3333-20TH ST VERO BEACH, FL 32960 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Added to Fees Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE NAME VOCELLE, LOUIS B., JR STREET ADDRESS 3333-20TH ST VERO BEACH, FL 32960 CITY-ST-ZIP TITLE <u> U</u>QQQQQ677556 03/30/07-80109-003 150.od NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P HHE NAME

12. I hereby certify that the information supplied with this filing does not qualify indicated on this report or supplemental eport is true and accurate and ha for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information hat my signature shall have the same legal effect as if made under oath; that I am an officer or director provided by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or rustee empowered to execute the changed, or on an attachment with an address, with all other the emp

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR