2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 27, 2006 08:00 AM Secretary of State **DOCUMENT # L65019** 1. Entity Name SKYSCRAPERS & SANDCASTLES INC. Principal Place of Business Mailing Address 1223 N LIME AVENUE 1223 N LIME AVE SARASOTA, FL 34237 SARASOTA, FL 34237 US 01202006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0183220 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BERKET, TERESA K. DO NOT WRITE 1223 N. LIME AVE. SARASOTA, FL 34237 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 primed 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, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE BERKET, TERESA K. NAME STREET ADDRESS 1223 N. LIME AVE CITY-ST-ZIP SARASOTA, FL U00000**4**49250 7177.E 99709506 80047-017 150.00 NAME STREET ADDRESS CITY-ST-ZIP 717LE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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 it 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 given just empowered.

MIED HAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: 🗹

SIGNATURE AND TYPE

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