## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 27, 2006 8:00 am Secretary of State

1. Entity Name FIRTH IN	MENT # M44086 VESTMENTS CORP.				03-2/-2	000 30271	)38 ***150	.00
STE #4	e of Business Ocean BLVD CH, FL 33062	Mailing Address PO BOX 11006 FORT LAUDERDALE, FL	. 33339		) 		50005	
	lace of Business	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			03132006 Chg-P	CR2E	034 (11/05)	
City & State Lauderd	lale-by-the-Sea, Fl				4. FEI Number 59-2768738	_	Not	plied For Applicable
Zip 3330	0011	Zip	Country		5. Certificate of Status Des		\$8.75 Addi Fee Required	
	6. Name and Address of Currer	nt Registered Agent	Name		7. Name and Address of	New Registered	l Agent	
FIRTH, MALCOLM 1201 SOUTH OCEAN BLVD				Louise Firth  Street Address (P.O. Box Number is Not Acceptable)				
STE #4   POMPANO BCH, FL 33062				250	-A Commercial F	Blvd.		
				Lauderdale-by-the-Sea, FL Zip Code 333308				
	named entity submits this statement ions of registered agent.	t for the purpose of changing its	registered office	or registe	red agent, or both, in the State	e of Florida. I an	n familiar with,	and accept
SIGNATURE	Signature, typad or printed name of registered age	ent and title if applicable. (NOT	E: Registered Agent si		ise Firth 3	DATE	06	<del></del>
	•							
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550	9. Election Campa Trust Fund Con			i.00 May Be ded to Fees			
After Ma	ay 1, 2006 Fee will be \$550					O OFFICERS AN	ND DIRECTORS	S IN 11
After Ma	OFFICERS AN	0.00 Trust Fund Con	tribution.	PTD	ADDITIONS/CHANGES T	O OFFICERS AN	ND DIRECTORS Thange	S IN 11
After Ma	ay 1, 2006 Fee will be \$550 OFFICERS AN	O.00 Trust Fund Con  ND DIRECTORS  Detete	11.	PTD Fir 250	ADDITIONS/CHANGES To th, Molly	Boulevar	EX Change	
After Ma  10.  TITLE  NAME  STREET ADDRESS	OFFICERS AN VPSD FIRTH, MOLLY 1201 SOUTH OCEAN BLVD #	Trust Fund Con  ND DIRECTORS  Delete  4 2	11. IITLE NAME STREET ADDRE	PTD Fir 250 Lau VSD Fir	ADDITIONS/CHANGES To th, Molly -A Commercial Indeedale-by-the-	Boulevare -Sea, FL	Change  d.  33308  Change	
After Ma 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN VPSD FIRTH, MOLLY 1201 SOUTH OCEAN BLVD # POMPANO BEACH, FL 33062 PTD FIRTH, MALCOLM	Trust Fund Con  ND DIRECTORS  Delete  4 2  Delete  Trust Fund Con	11. IITLE NAME STREET ADDRE CITY-ST-ZIP TITLE NAME	PTD Fir 250 Lau VSD Fir 250	th, Molly -A Commercial laderdale-by-the-	Boulevard -Sea, FL Boulevard	id 33308 ☐ Change	Addition
After Ma  10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	OFFICERS AN  VPSD FIRTH, MOLLY 1201 SOUTH OCEAN BLVD # POMPANO BEACH, FL 33062 PTD FIRTH, MALCOLM 1201 SOUTH OCEAN BLVD S	Trust Fund Con  ND DIRECTORS  Delete  4 2  Delete  Trust Fund Con	11.  IITLE NAME STREET ADDRE CITY-ST-ZIP TITLE NAME STREET ADDRE CITY-ST-ZIP TITLE NAME STREET ADDRE CITY-ST-ZIP TITLE NAME STREET ADDRE	PTD Fir 250 Lau VSD Fir 250 Lau	th, Molly -A Commercial lederdale-by-the- th, Louise	Boulevard -Sea, FL Boulevard	id 33308 ☐ Change	Addition
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introcated 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 other like empowered.

Louise Firth 3-22-06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 954-491-6670 SIGNATURE: <