NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 11, 2006 8:00 am Secretary of State DOCUMENT # 1/9500001404 04-11-2006 90106 024 ****61.25 TRESERVE & BOCA LATON 50010877 DO NOT WRITE IN THIS SPACE 20 Jincipal Place of Business 3. Mailing Address AKAM ON SITE AKAM ON SITE Suite, Apt. #, etc. Suite, Apt. #, etc. STE CR2E037B (8/05) 6421 CONGRESS AVE. 110 6421 CONGRESS AVE 110 4. FEI Number 232842340 City & State City & State Applied For BOCA BATON BOCA RANDA a Not Applicable 33487 Country Frum Bassy \$8.75 Additional Country 5. Certificate of Status Desired PouriBeau Fee Required 7. Name and Address of Current Registered Agent LAW FRM DO NOT WRITE IN THIS SPACE 8. The above named entity submits this statement or 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. Kenth BACIGEN DATE Signature, type:20r prin 9. Election Campaign Financing Make Check Payable to **FEE IS \$61.25** \$5.00 May Be Trust Fund Contribution. Florida Department of State Initial or Amended AR Added to Fees OFFICERS AND DIRECTORS 10. TITLE GARAY OLAHUR COURT 4947 NW 2312 COURT BOLA RATON, FL 33431 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE KEVIN WILEY LANE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE FRED NAME NAME. 23 NW 490 LANE STREET ADDRESS STREET ADDRESS DO NOT WRITE RATION, FL 3343 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ARY GOLD FARB IN THIS SPACE NAME NW BBAD COURT STREET ADDRESS STREET ADDRESS RAIDN, FL 33431 CITY-ST-ZIP CITY-ST-ZIP SCHULSON 2408 NW 499 LANE NAME NAME STREET ADDRESS STREET ADDRESS BOCA RAIDN, FL 33431 CITY-ST-ZIP CITY-ST-7/P

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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 receive or trustife employered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or on an attraction of the corporation of the c attachment with an address.

TITI F

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

Garry Dlato