2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0000002052

FILED Mar 21, 2007 Secretary of State

| Entity Name: FIBER ACCENTS, INC. | • |
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| Current Principal Place of Business: | New Principal Place of Business: |
| 7535 CASTLE DR. SARASOTA, FL 34240 | 6321 PORTER RD. SUITE 8 SARASOTA, FL 34240 |
| Current Mailing Address: | New Mailing Address: |
| 7535 CASTLE DR. SARASOTA, FL 34240 | 6321 PORTER RD. SUITE 8 SARASOTA, FL 34240 |
| FEI Number: 65-0972237 FEI Number Applied For () FEI Number | nber Not Applicable () Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | Name and Address of New Registered Agent: |
| MANN, WILLIAM F II 7535 CASTLE DR. SARASOTA, FL 34240 US | MANN, WILLIAM F II 6321 PORTER RD. SUITE 8 SARASOTA, FL 34240 US |
| The above named entity submits this statement for the purpose of in the State of Florida. | f changing its registered office or registered agent, or both, |
| SIGNATURE: | 03/21/2007 |
| Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution (). | Date |
| OFFICERS AND DIRECTORS: | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |
| Title: PTD () Delete Name: MANN, WILLIAM F II Address: 7535 CASTLE DR. City-St-Zip: SARASOTA, FL 34240 | Title: P (X) Change () Addition Name: MANN, WILLIAM F II Address: 6321 PORTER RD., SUITE 8 City-St-Zip: SARASOTA, FL 34240 |
| Title: () Delete Name: Address: City-St-Zip: | Title: VP () Change (X) Addition Name: MANN, CARRIE E Address: 6321 PORTER RD., SUITE 8 City-St-Zip: SARASOTA, FL 34240 |
| Title: () Delete Name: Address: City-St-Zip: | Title: T () Change (X) Addition Name: DAUPLAISE, JOHN A Address: 6321 PORTER RD., SUITE 8 City-St-Zip: SARASOTA, FL 34240 |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARRIE E. MANN VP 03/21/2007