2006 FOR PROFIT CORPORATION

May 08, 2006 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P00000007264 1. Entity Name 05-08-2006 90295 050 ***150.00 MICRO MANAGEMENT SYSTEMS, INC. Principal Place of Business Mailing Address 1510 SILVER OAKLAND 12847 SWAMP OWL LANE JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32258-2180 04282006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3627121 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DEER, THOMAS J JR DO NOT WRITE 12847 SWAMP OWL LANE JACKSONVILLE, FL 32258 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) 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 10. OFFICERS AND DIRECTORS TITLE NAME MACMANUS, THOMAS R STREET ADDRESS 1510 SILVER OAK LANE CITY-ST-ZIP JACKSONVILLE, FL 32223 TITLE MACMANUS, MARGARET S MAME STREET ADDRESS 1510 SILVER OAK LANE CITY-ST-ZIP JACKSONVILLE, FL 32223 TITLE NAME SADLER, THOMAS J JR STREET ADDRESS 12847 SWAMP OWL LANE DO NOT WRITE CITY-ST-ZIP JACKSONVILLE, FL 32258 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

FILED

12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if

STREET ADDRESS CITY-ST-ZIP