2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 29, 2006 8:00 am Secretary of State 03-29-2006 90120 035 ***150.00 DOCUMENT # P00000100533 GOTTLIEB INVESTMENTS, INC. Principal Place of Business Mailing Address 20300 S DIXIE HWY _20300 S DIXIE TIWY 18001 Old Cutter Rd #472 MIAMI, FL 33189 Palmetto Bay, Fl. 33157 CR2E034 (11/05) 01092006 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1057120 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GOTTLIEB, MICKEY DO NOT WRITE 20300 S DIXIE HWY MIAMI, FL 33189 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 DATE (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 OFFICERS AND DIRECTORS 10. TITLE GOTTLIEB, MICKEY NAME 20300 S DIXIE HWY STREET ADDRESS MIAMI, FL 33189 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZiP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

FILED