2007 FOR PROFIT CORPORATION

Feb 28, 2007 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P01000002666 KAMMERER ENTERPRISES, INC. Principal Place of Business Mailing Address 3 HARBOR POINT PL 3 HARBOR POINT PL SAFETY HARBOR, FL 34695 SAFETY HARBOR, FL 34695 01132007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3690646 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KAMMERER, DIANA J DO NOT WRITE 3 HARBOR POINT PL SAFETY HARBOR, FL 34695 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 Fiorida. I am familiar with, and accept the obligations of registered agent. 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 NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE KAMMERER, RONALD T NAME 3 HARBOR POINT PL STREET ADDRESS CITY-ST-ZIP SAFETY HARBOR, FL 34695 TITLE KAMMERER, DIANA J STREET ADDRESS 3 HARBOR POINT PL CITY-ST-ZIP SAFETY HARBOR, FL 34695 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 trusted expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in

SIGNATURE

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED