2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 17, 2006 8:00 am Secretary of State

1. Entity Name	MENT # P010000076				90127 023 ***150	0.00		
Principal Place of	of Business	Mailing Address			0033554			
1120 3RD ST.		1120 3RD ST.		- 1 J 3	0000			
ST. AUGUSTINE, FL 32095		ST. AUGUSTINE, FL 32095		1	•			
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2. Principal Place	ce of Business	3. Mailing Address , 3370 AGRICU	· · · · · · · · · · · · · · · · · · ·	1.0				
Suite, Apt. #,	SKILULTURAL CTR IX.	, <u>, ,2,5/0/76</u> K / C Suite, Apt. #, etc.	LTUICHU C					
Soite 102		Suite 102		03022006	Chg-P	CR2E034 (11/05)		
St. AUGUSTING, FL		St. HUGUSTINE, FL.		4. FEI Numb 59-369			plied For t Applicable	
32 09	2 St. John's	Zip ZO-Ca	Sodintry St. JoH.		of Status Desired	\$8.75 Add	itional	
.JUU 1	6. Name and Address of Current R	egistered Agent	<u> </u>		Address of New R	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
				···		100		
STINCHFIELD, CHARLES 14 COVE RD			Street A	Street Address (P.O. Box Number is Not Acceptable)				
– – . – –	DRA BEACH, FL 32082			Street Address (F.O. DUX Multipet is indi Acceptable)				
	•		City			FL Zip Code	3	
8. The above no	amed entity submits this statement for	the purpose of changing its re	egistered office o	registered agent, or bo	th, in the State of Fl	orida. I am familiar with,	and accept	
the obligation	ns of registered agent.					-1-1.		
CIÔNATURE .	1 1 . 1 . 1 . 1 . 1	/ / /						
SIGNATURE	ignature, typed or printed name ovegistered agent an	d titl applicable. (NOTE:	Registered Agent signat	ure required when rainstating)		3/15/06 DATE	[
Si						3/13/06 DATE	<u>.</u>	
FILE	grature, typed or printed name overgistered agent an NOW!!! FEE IS \$150.00 y 1, 2006 Fee will be \$550.00	9. Election Campaig	n Financing	\$5.00 May Be Added to Fees	· · · · · ·	3/13/06 DATE		
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2. 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.

904-829-5494