2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 19, 2007 08:00 AM **DOCUMENT # P01000026928** Secretary of State THE LAZY GECKO, INC. Principal Place of Business Mailing Address 203 DUVAL ST 203 DUVAL ST KEY WEST, FL 33040 KEY WEST, FL 33040 No Chg-P CR2E034 (11/05) 01242007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1082544 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCOTT, PETER D DO NOT WRITE 203 DUVAL ST KEY WEST, FL 33040 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) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME SCOTT, PETE STREET ADDRESS 1725 LAIRD STREET CITY-ST-ZIP KEY WEST, FL 33040 ST TITLE SWEENEY, ELIZABETH NAME STREET ADDRESS 1725 LAIRD STREET CITY-ST-71P KEY WEST, FL 33040 000000672837 03/29/07-80005-005 158.75 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE WE THE ADDRESS on supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information amental 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 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 the an address, with all other like empowered.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR