2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2007 8:00 am Secretary of State DOCUMENT # P01000050302 04-23-2007 90085 009 ***150.00 ETP ENTERPRISES, INC. Principal Place of Business Mailing Address 10013200 5144 NORTHWEST 57TH DR 5144 NORTHWEST 57TH DR CORAL SPRINGS, FL 33067-4025 CORAL SPRINGS, FL 33067-4025 CR2E034 (11/05) 04072007 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 65-1105917 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent HANNA, THOMAS R DO NOT WRITE 5144 NORTHWEST 57TH DR CORAL SPRINGS, FL 33067-4025 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) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME HANNA, THOMAS R 5144 NORTHWEST 57TH DR STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 330674025 TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 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 truffee 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 oddress, with all other like empowered. Thomas R. Hanna 954-<u>598-0958</u> SIGNATURE: >

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED