2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME O

Apr 20, 2005 08:00 AM Secretary of State DOCUMENT # P01000052387 FRANKLYN GLOBAL CONCEPTS, INC. Principal Place of Business Mailing Address 3571 RED BARN LN 3571 RED BARN LN ORMOND BCH, FL 32174 ÖRMOND BCH, FL 32174 04152005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3732148 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Registered Agent DONTFRAID, FRANKLYN DO NOT WRITE 3571 RED BARN LN ORMOND BCH, FL 32174 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 trile if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME DONTFRAID, FRANKLYN STREET ADDRESS 3571 RED FARN LN CITY-ST-ZIP ORMOND BEACH, FL 32174 __U00000317263 04/20/05-80011-015 150.00 ПTLE VΡ DONTFRAID, GWENETH NAME STREET ADDRESS 3571 RED BARN LN CITY-ST-ZIP ORMOND BEACH, FL 32174 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CMY-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 exemption stated in Section 119.07(3)(i). 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.

FILED