2006 FOR PROFIT CORPORATION

Apr 12, 2006 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT#P01000058597 t. Entity Name JON PREIKSAT, P.A. ATTORNEY AT LAW Principal Place of Business Mailing Address 17 GULF MANOR DR 17 GULF MANOR DR VENICE, FL 34285 VENICE, FL 34285 US 01062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1109259 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent PREIKSAT, JON ' DO NOT WRITE 17 GULF MANOR DR VENICE, FL 34285 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. (NOTE, Registered Agent signature required when reinstating) DATE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS me PREIKSAT, JON NAME 17 GULF MANOR DR STREET ADDRESS U00000503423 04/26/06-80031-015 150.00 CITY-ST-ZIP VENICE, FL 34285 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 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 trustee empowered to execute this regular day Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if chapter 607 or an attachment with an address, with all other like empowered.

SIGNATURE:

nns NAME STREET ADDRESS CITY-ST-ZIP

FILED