2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jan 29, 2007 08:00 AM **Secretary of State** DOCUMENT # P01000090511 1. Entity Name SONJA BENSON, INC. Principal Place of Business Malling Address 1209 THIRD STREET SOUTH 1209 THIRD STREET SOUTH NAPLES, FL 34102 NAPLES, FL 34102 01112007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3605427 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BENSON, SONJA DO NOT WRITE 1209 THIRD STREET SOUTH NAPLES, FL 34102 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000607915 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS IITLE BENSON, SONJA STREET ADDRESS 1209 THIRD STREET SOUTH NAPLES, FL 34102 CITY-ST-ZIP 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 CATY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

FILED