2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jun 01, 2006 8:00 am **Secretary of State DOCUMENT # P01000106822** 06-01-2006 90002 050 ***150.00 METALHEADS, INC. Principal Place of Susiness Mailing Address 1409 NORA LN P.O. BOX 7074 NORTH PORT, FL 34286 NORTH PORT, FL 34287 50020151 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) 05172006 Chg-P City & State City & State 4. FEI Number Applied For 59-3754177 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CARR, MICHAEL Street Address (P.O. Box Number is Not Acceptable) **1409 NORA LN** NORTH PORT, FL 34286 City Zip Code 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. (NOTE: Reciptored Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$550.00 Trust Fund Contribution. Added to Fees ©Due by September 6, 2006 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TET1 F AS Delete TITLE Change Addition ALMOND, JASON K NAME **CENTER RD** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VENICE, FL CITY-ST-ZIP Delete TITLE Change Addition LONG, TIMOTHY C NAME NAME STREET ADDRESS 1414 CORTAGE AVE STREET ADDRESS CITY-ST-ZIP NORTH PORT, FL 34287 CITY-ST-ZIP TOF ☐ Delete TITLE Change ☐ Addition CARR. MICHAEL NAME NAME STREET ADDRESS **1409 NORA LN** STREET ADDRESS NORTH PORT, FL 34286 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition CARR, BRANDON M NAME NAME STREET ADDRESS **1409 NORA LN** STREET ADDRESS CITY-ST-ZIP NORTH PORT, FL 34286 CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change Carr, Georgia NAME STREET ADDRESS STREET ADDRESS North Por CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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.

G OFFICER OR DERECTOR

FILED

5-25-06

ATTACHMENT

Metalheads Inc.

Michael Carr, President P.O. Box 7074

North Port, FL 34287

May 25, 2006

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

To Whom It May Concern:

I happened to go on your website under my document # P01000106822, to make changes to my annual report and noticed a fee for \$550.00. I called (850) 245-6056 and explained I never received any notice to update. She informed me to send you this letter and the original fee of \$150.00. Also you will find the updated information for my annual report to add to your website.

Sincerely,

Michael Carr