2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 10, 2006 8:00 am Secretary of State DOCUMENT # P01000117496 05-10-2006 90097 045 ***150.00 STANLEY INDUSTRIES OF SOUTH FLORIDA, INC. Principal Place of Business Mailing Address 60037656 3137 COMMERCE PKWY 3137 COMMERCE PKWY MIRAMAR, FL 33025 MIRAMAR, FL 33025 2. Principal Place of Business 3. Mailing Address 10106 USA Today Way 10106 USA Today Was 01092006 CR2E034 (11/05) City & State City & State 4. FEI Number Applied For Miramari Miramac Not Applicable 01-0566399 Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 3<u>3025</u> USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Alexander STERN, MICHAEL Street Address (P.O. Box Number is Not Acceptable 3137 COMMERCE PKWY MIRAMAR, FL 33025 Zip Code Miramar 3309€ 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Change Addition Delete TITLE TITLE ALEXANDER, ROBERT NAME NAME 10106 USA TODAY WAY 3137 COMMERCE PKWY STREET ADDRESS STREET ADORESS MIRAMAR, FL 33025 CITY-ST-ZIP CITY-ST-ZIF Miramar, 7 VΩ TITLE ☐ Delete TITLE Addition ALEXANDER, STEVEN NAME NAME STREET ADDRESS 3137 COMMERCE PKWY STREET ADDRESS 10106 USA Today wa MIRAMAR, FL 33178 CITY-SI-7/P CITY-ST-ZIP Delete ☐ Addition TITLE TITLE NAME ALEXANDER, JEROME NAME 10106 USA Today way 3137 COMMERCE PKWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIRAMAR, FL 33025 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-7IP CITY-ST-7IP

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 eath; 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED