2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 05, 2007 08:00 Al Secretary of State DOCUMENT # P01000121320 PEARL JANE COLLINS, P.A. Principal Place of Business Mailing Address 8330 A1A SOUTH 8330 A1A SOUTH SAINT AUGUSTINE, FL 32080 SAINT AUGUSTINE, FL 32080 CR2E034 (11/05) 03122007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 26-0004976 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent COLLINS, P. JANE DO NOT WRITE 8330 A1A SOUTH SAINT AUGUSTINE, FL 32080 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, typed or printed name of registered epent and title if applicable. (NOTE: Registered Agent agreture required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PSTD TITLE COLLINS, P. JANE NAME STREET ADDRESS 8330 A1A SOUTH CITY-ST-ZIP SAINT AUGUSTINE, FL 32080 U00000691214 04/13/07-80001-024 150.00 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 TITLE STREET ADDRESS 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 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:

TITLE NAME STREET ADDRESS

FILED