2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2006 8:00 am Secretary of State 05-04-2006 90208 015 ***150.00

DOCUMENT # P02000030655						03-04-2000 90208 013 1130.00				
EARTHFIRE USA, INC.										
						*00	11089			
Principal Place of Business Mailing Address						40083273				
1167 3 ST S, STE 107 1167 3 ST S, STE 107										
NAPLES, FL 34102 NAPLES, FL 34102										
		,								
2. Principal Place of Business 3. Mailing Address 3425 Tamiami Trail No 2425 Tamiami					il No.					
Suite, Apt. #, etc. Suite 214			Suite, Apt. #, etc. 54,46 214			04242006	Chg-P	CR2E034 (11/05)		
City & State			City & State			4. FEI Number		Į Aį	pplied For	
Zip Country			Vaples FL Zip Country			04-3663518 Not Applicable				
34103		er 3	4/03-4478	C0111	er	5. Certificate o	f Status Desired	S8.75 Add Fee Require		
	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
DEE, KELLY R					Name,					
1167 3 ST S, STE 107 ***********************************					Street Address (P.O. Box Number is Not Acceptable)					
103 220,12 34102					Suite 214					
					Naples FL Zip Code					
	named entity submits thi	is statement for the	purpose of changing its	registered offi	ce or register	ed agent, or both	, in the State of Flo	orida. I am familiar with,	and accept	
tile obligat	ions of registered agent.	50					~	1.10		
SIGNATURE.	Signature, typed or printed name	of registered agent and it	tle if applicable. (NOTE	Registered Agent	signature required	f when reinstating)		/1/06		
		±8°	9 Election Compai	no Financina		00		.		
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.					□ Add	.00 May Be ed to Fees				
10.	OF	FICERS AND DIR	ECTORS	11.		ADDITIONS/C	HANGES TO OFF	ICERS AND DIRECTOR	S IN 11	
TITLE	_ 55,515			TITLE				Change	Addition	
NAME STREET ADDRESS				NAME STREET ADDR	ESS 24.	s 2425 Tamiami Trail North, Ste. 214				
CITY-ST-ZIP	NAPLES, FL 34102			CITY-ST-ZIP	Na	Naples, FL 3403-4478				
TITLE	D		☐ Delete	TITLE		•		™ Change	Addition	
NAME STREET ADDRESS	MORGAN, JAMES R s 1167 THIRD STREET SOUTH STE 107 STR				ESS 243	s 2425 Tamiami Trail North, Ste. 214 Naples, FL 34103-4478				
CITY-ST-ZIP	NAPLES, FL 34102				No	iles. FL	3410	3-4478	•	
IITLE	S ☐ Delate 117							Change	Addition	
NAME STREET ADDRESS	MORGAN, JAMES R ESS 1167 THIRD STREET SOUTH STE 107				ESS 24.6	5 Tam	iami Tr	ail North	Ste 214	
CITY-ST-ZIP	NAPLES, FL 34102				1/0	Alpa I	ر رہے	10 2 - UH70	,	
TITLE	P		Delete	TITLE		,		Change Change	Addition	
NAME STREET ADDRESS	MORGAN, JAMES R PRESS 1167 THIRD STREET SOUTH STE 107				ecc 24	25 Tan	niami Tr	ail North,	Ste. 214	
CITY-ST-ZIP	NAPLES, FL 34102				Na	DIES. F	=L 3410	Change 3-4478 Change		
TITLE	D Delete			TITLE		,,		Change	Addition	
NAME STREET ADDRESS				NAME STREET ADDR						
CITY-ST-ZIP				CITY-ST-ZIP	No	ples,	FL 3	4103-4478 Change)	
INTE	V Delete		TITLE		• •		Change	☐ Addilion		
NAME	MODOAN INNECE	>		MANAP				- 1		
STREET ADDRESS	MORGAN, JAMES F 1167 THIRD STREE			NAME STREET ADDR	ess 246	35 Tam	kui Tr	rail North	stelle	
STREET ADDRESS CITY-ST-ZIP		T SOUTH STE			ess 24 g	75 Tam	Kuni Tr	ail North	, ste 214	

I hereby certify that the information supplied with this filling does not quality 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.

239-262-6921 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: