2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000066448 Secretary of State 03-13-2006 90066 024 ***150.00 PATRICK MESSERICH, P.A. Principal Place of Business Mailing Address 14541 GRANDE CAY CIRCLE, UNIT 3110 14541 GRANDE CAY CIRCLE, UNIT 3110 FT. MYERS, FL 34908 FT. MYERS, FL 34908 3. Mailing Address 2. Principal Place of Business Suite Apt #, etc. Suite, Apt. #, etc. 03012006 CR2E034 (11/05) Chg-P 4. FEI Number Applied For City & State City & State 76-0715147 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 MESSERICH, PATRICK Street Address (P.O. Box Number is Not Acceptable) 14541 GRANDE CAY CIRCLE, UNIT 3110 FT. MYERS, FL 34908 Zip Code 8. The above named entity submits this statement for the purpose of manging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, 2000 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. D ☐ Detete TITLE ☐ Change ☐ Addition **4**1717 MESSERICL, PATRICK J NAME NAME STREET ADDRESS 14541 GRANDE CIR. #3110 STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33908 CITY-ST-7IP ☐ Change TITLE □ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change 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 peport or suppliemental report is frue 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 readired by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment subject and other like empowered.

SIGNATURF:

FILED

Mar 13, 2006 8:00 am