2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 20, 2006 08:00 AN Secretary of State DOCUMENT # P02000089438 JANICE MEE, INC. Mailing Address Principal Place of Business 1701 CLOWER CREEK DR #159 1701 CLOWER CREEK DR #159 SARASOTA, FL 34231 SARASOTA, FL 34231 CR2E034 (11/05) 04152006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-2373135 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE MEE, JANICE 1701 CLOWER CREEK DR #159 SARASOTA, FL. 34231 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. Signature, typed or printed name of registered agent and file if applicable. (NOTE, flugistered 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 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. IIILE U00000521505 05/02/06-80137-024 [50.00 MEE, JANICE NAME STREET ADDRESS 1701 CLOWER CREEK DR #159 SARASOTA, FL 34231 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS 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.

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Janice K. Mee 4-16-06

6 966-7102 Daytime Priorie #

FILED