2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# P02000125661

Entity Name: CAROLE MAZZA INC.

Current Principal Place of Business:

8800 N BATES RD
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

5319 ATLANTIC VIEW
ST. AUGUSTINE, FL 32080

Current Mailing Address:

8800 N BATES RD
PALM BEACH GARDENS, FL 33418

New Mailing Address:

5319 ATLANTIC VIEW
ST. AUGUSTINE, FL 32080

FEI Number: 83-0344696 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAZZA, CAROLE
8800 N BATES RD
PALM BEACH GARDENS, FL 33418 US

Name and Address of New Registered Agent:

MAZZA, CAROLE
5319 ATLANTIC VIEW
ST. AUGUSTINE, FL 32080 US

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.

SIGNATURE: 04/26/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MAZZA, CAROLE
Address: 8800 N BATES RD
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: V ( ) Delete
Name: MAZZA, DOUG
Address: 8800 N BATES RD
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MAZZA, CAROLE
Address: 5319 ATLANTIC AVENUE
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: V (X) Change ( ) Addition
Name: MAZZA, DOUG
Address: 5319 ATLANTIC VIEW
City-St-Zip: ST. AUGUSTINE, FL 32080

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROLE MAZZA P 04/26/2006
Electronic Signature of Signing Officer or Director — Date