2007 FOR PROFIT CORPORATION

NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S1-71P

FILED ANNUAL REPORT. Apr 30, 2007 08:00 Al Secretary of State **DOCUMENT # P02000132292** 1. Entity Name TORG-EJT, INC. Principal Place of Business Mailing Address P.O. BOX 2241 P.O. BOX 2241 DAVENPORT, FL 33836 DAVENPORT, FL 33836 01212007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 22-3888260 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE TORGERSEN, EDWARD J III 215 TORGERSEN LANE DAVENPORT, FL 33837 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE TORGERSEN, EDWARD J III NAME P.O. BOX 2241 STREET ADDRESS DAVENPORT, FL 33836 CITY-ST-ZIP TITLE U00000745625 05/16/07-80037-010 150.00 NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE 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