2006 FOR PROFIT CORPORATION ANNUAL REPORT

CTTY-ST-ZIP

changed, or on an attachment with an address, with all other like empowered.

Apr 12, 2006 08:00 AM **Secretary of State** DOCUMENT # P03000005374 DIANA L. LASSEL, P.A. Principal Place of Business Malling Address 903 THOMAS STREET 903 THOMAS STREET KEY WEST, FL 33040 KEY WEST, FL 33040 04082008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 37-1606860 Applied For Not Applicat. \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LASSEL, DIANA L DO NOT WRITE 903 THOMAS STREET KEY WEST, FL 33040 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 access the obligations of registered agent. (NOTE: Registered Apent algorithms required when reinstalling) eldsollage il etti bre inegs bere 1100000504051 04/26/06-80057-805 150.**00** \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PSD TITLE NAME LASSEL, DIANA L 903 THOMAS STREET STREET ADDRESS C97-ST-71P KEY WEST, FL 33040 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITI F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

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 it made under onth; that I am an officer or directly the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block in

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