2008 FOR PROFIT CORPORATION ANNUAL REPORT

NAME STREET ADDRESS

SIGNATURE!

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

Mar 31, 2008 08:00 A **Secretary of State DOCUMENT # P03000024387** CLOSE JOWERS, INC. Principal Place of Business Mailing Address 2158 S HWY 441 STE 103 2158 S HWY 441 STE 103 APOPKA, FL 32703 APOPKA, FL 32703 No Chg-P CR2E034 (11/05) 02292008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3769132 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOWERS, STEVE DO NOT WRITE 2158 S HWY 441 STE 103 APOPKA, FL 32703 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME TOWERS, STEVE STREET ADDRESS 2158 S. HWY 441, #103 CITY-ST-ZIP APOPKA, FL 32703 TITLE U00000874267 04/10/08-80106-024 150.00 CLOSE, THOMAS NAME STREET ADDRESS 2232 NW 32ND DR CITY-ST-ZIP OKEECHOBEE, FL 34972 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

125/05 407.880-1655

FILED