## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Mar 20, 2006 8:00 am **Secretary of State DOCUMENT # P03000036122** 03-20-2006 90006 020 \*\*\*150.00 1. Entity Name THIRD BASE, INC. Principal Place of Business Mailing Address 4000 N FEDERAL HWY STE 201 4000 N FEDERAL HWY STE 201 BOCA RATON, FL 33431 BOCA RATON, FL 33431 01202006 No Chq-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 42-1585445 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent LEVINE, JEFFREY A DO NOT WRITE 4000 N FEDERAL HWY STE 201 BOCA RATON, FL 33431 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 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 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE ANSEL, JEROME NAME STREET ADDRESS 7227 CLINT MOORE RD CITY-ST-ZIP BOCA RATON, FL 33496 TITLE NAME REITSMA, RONALD 7227 CLINT MOORE RD STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33496 TITLE KIRIACON, ARTHUR NAME STREET ADDRESS 7227 CLINT MOORE RD DO NOT WRITE CITY-ST-ZIP BOCA RATON, FL 33496 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7P 12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I turther certify that the information indicated on this report or supplemental peoprt 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 trystee 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 all address, with all other like empowered.

FILED

Daytime Phone #