2005 FOR PROFIT CORPORATION

ANNUAL REPORT FILED DOCUMENT # P03000043577 Jul 11, 2005 08:00 AM RADÍAN INVESTMENTS, INC. **Secretary of State** Principal Place of Business Mailing Address **7509 REGENTS GARDEN WAY** 11028 4TH STREET NORT H SAINT PETERSBURG, FL 33716 APOLLO BEACH, FL 33572 No Chg-P CR2E034 (10/03) 07052005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3771709 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GALLAGHER, GLENN E ESQ. DO NOT WRITE BYRNE & GALLAGHER, P.A. 350 GULF BLVD IN THIS SPACE INDIAN ROCKS BEACH, FL 33785 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. 07/11/05-80007-002 150.00 SIGNATURE Signatura, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature regulred when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS 10. TITLE NAME SPARKES, DIANNE M STREET ADDRESS 7509 REGENTS GARDEN WAY CITY-ST-ZIP APOLLO BEACH, FL 33572 TITLE NAME SPARKES, RAYMOND D 7509 REGENTS GARDEN WAY STREET ADDRESS CITY-ST-78P APOLLO BEACH, FL 33572 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP