2007 FOR PROFIT CORPORATION ANNUAL REPORT-

ANNUAL REPORT-FILED SECRETARY OF STATE **DOCUMENT # P03000067667** DIVISION OF CORPORATIONS 1. Entity Name BELLE WALDNER, P.A. 07 MAR 26 AM 6: 59 Principal Place of Business Mailing Address 03/09/06 80052 001 150° 703 BRIDGEWOOD DRIVE 703 BRIDGEWOOD DRIVE BOCA RATON, FL 33434 BOCA RATON, FL 33434 CR2E034 (11/05) 03042007 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number 54-2115856 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WALDNER, BELLE DO NOT WRITE 703 BRIDGEWOOD DRIVE BOCA RATON, FL 33434 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 \$5.00 May Be After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PSD TITLE NAME WALDNER, BELLE STREET ADDRESS 703 BRIDGEWOOD DRIVE BOCA RATON, FL 33434 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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