2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 17, 2008 08:00 Al Secretary of State DOCUMENT # P03000088891 1. Entity Name DAD'S PAD INC. Principal Place of Business Mailing Address POST OFFICE BOX 1549 GT 201 S. BISCAYNE BLVD. GRAND CAYMAN. SUITE 1500 (RWV) MIAMI, FL 33131 CR2E034 (11/05) 03282008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0160381 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION COMPANY OF MIAMI DO NOT WRITE 201 S BISCAYNE BLVD SUITE 1500 MIAMI, FL 33131 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 eignature required when reinstating) 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 10. OFFICERS AND DIRECTORS TITLE CORBIN, ROGER A NAME STREET ADDRESS PO BOX 1549 GT CITY-ST-ZIP GRAND CAYMAN, TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IIILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP MALAF STREET ADDRESS CITY-ST-ZIP 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 eath; 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

FILED