2006 FOR PROFIT CORPORATION

FILED May 30, 2006 8:00 am

ANNUAL REPORT						Secretary of State			
1. Entity Nam	MENT # P030000997 ETART OF TAMPA, INC.	700	The second				0037 036 ***150		
Principal Place of Business 3814 CYPRESS MEADOW ROAD TAMPA, FL 33624		Mailing Address 3814 CYPRESS MEADOW ROAD TAMPA, FL 33624			. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		II BEKIN (BING (DIN) (BEKI NEK) (
Principal Place of Business 9905 BENNINGION DRIVE		3. Mailing Address 9905 BENNINGTON DRIVE							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05172006	Chg-P	CR2E034 (11/05)			
City & State TAMPA, FL		City & State TAMPA, FL			4. FEI Numb 20-023	_		pplied For ot Applicable	
^{Zip} 33626	્ક્દ્ભountry	^{Zip} 33626	Country		5. Certificate	of Status Desired	□ \$8.75 Ad Fee Require		
	6. Name and Address of Current R	egistered Agent			7. Name and	Address of New R	legistered Agent		
ECKLEY, BRYAN					7, BRYAN				
3923 WEST CASS STREET TAMPA, FL 33609			Ľ	9905 Bi	NNINGTON	er is Not Acceptable DRIVE			
			-	TAMPA			FL Zin Cox	te.	
9 The shave	named entity submits this statement for	the aurean of chancing its					3302		
	tions of registered agent.	li			ulred when reinstating)	ar, in the State of the	x = 5/3c	0/06	
t .	LE NOWIJI FEE IS \$150.00 ue by September 6, 2006				5.00 May Be Added to Fees	ded to Fees corporation did not receive the prior notice.			
10.	OFFICERS AND D		11.			CHANGES TO OFF	ICERS AND DIRECTOR		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD ECKLEY, BRYAN 3923 WEST CASS STREET TAMPA, FL 33609	□ Delete	TITLE NAME STREET A	ADDRESS 99	P/S/T KLEY, BRY 005 BENNIN MPA, FL 3	GTON DRIVE	A Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD DIENES, WILLIAM N 3814 CYPRESS MEADOWS ROA TAMPA, FL 33624	Ø Delete ∙D	TITLE NAME STREET A CITY-ST	ADORESS 1-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET A	ADORESS 1-ZIP			☐ Change	Addition	
			TITLE	1			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	NAME	ADDRESS T-ZIP			Sizings		
NAME STREET ADDRESS		□ Delete □ Delete	NAME STREET A CITY-ST TITLE NAME	r-zip Address			☐ Change	Addition	

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: X

NAME STREET ADDRESS

SCHATURE AND TYPED OR PRIVIED NAME OF SIGNING OFFICER OR DIRECTOR