2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Aug 02, 2007 8:00 am Secretary of State DOCUMENT # P03000104338 08-02-2007 90012 014 ***550.00 FRANK EXCEL MARLEY, III, P.A. Principal Place of Business Mailing Address 9925 MIAMI LAKES DRIVE 9925 MIAMULAKES DRIVE MIAMI LAKES, FL 23014 MAMI LAKES, FL 33014 2. Principal Place of Business - No P.O. Box # 3450 Lakeside Drive 3. Mailing Address 3450 Lakeside Drive Suite, Apt. #, etc. Suite, Apt. #, etc. 06202007 Chg-P CR2E034 (12/06) Suite 110 Suite City & State City & State 4. FEI Number Applied For 1: lamar 56-2397625 Not Applicable Country Zip Zip \$8.75 Additional 5. Certificate of Status Desired UŚA 33027 33 027 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FRANK E MARLEY, III, ESQ. 6625 MIAMI LAKES DRIVE STE 312 MIAMI LAKES, FL 33014 Zip Code 330 27 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 (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Due by September 14, 2007 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DPST TITLE ☐ Delete TITLE Change Addition MARLEY, III, FRANK E NAME NAME 3450 Lukeside Drive Ste. 110 STREET ADDRESS 6625 MIAMI LAKES DRIVE STE 312 STREET ADDRESS Misumar, FL 33029 CITY-ST-ZIP MIAMI LAKES, FL 33014 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TOTALE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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

Frank E. Marley, III

FILED