


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000109698 1. Entity Name FIRST CLASS AMERICAN EVENTS, INC.	
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Principal Place of Business 27296 JOHNSON ST BONITA SPRINGS, FL 34135	Mailing Address 27296 JOHNSON ST BONITA SPRINGS, FL 34135
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07272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0292152	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WESTIN, BO 27296 JOHNSON ST BONITA SPRINGS, FL 34135
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**DO NOT WRITE
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 **BO WESTIN, PRESIDENT**  **7/24/06**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE P	WESTIN, BO
NAME WESTIN, BO	27296 JOHNSON ST
STREET ADDRESS 27296 JOHNSON ST	BONITA SPRINGS, FL 34135
CITY-ST-ZIP BONITA SPRINGS, FL 34135	
TITLE NAME	
STREET ADDRESS NAME	
CITY-ST-ZIP NAME	
TITLE NAME	
STREET ADDRESS NAME	
CITY-ST-ZIP NAME	
TITLE NAME	
STREET ADDRESS NAME	
CITY-ST-ZIP NAME	

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08/01/06-80007-024 150.00

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:  **BO WESTIN** **7/24/06** **239-591-1940**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #