2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 03, 2006 08:00 AM Secretary of State DOCUMENT # P03000117194 1. Entity Name BINDERY MASTERS, INC. Principal Place of Business Mailing Address 14004 LAKE GEORGE CT 14004 LAKE GEORGE CT MIAMI LAKES, FL 33014-3026 MIAMI LAKES, FL 33014-3026 04052006 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0711358 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOSE I. PADIAL. PA DO NOT WRITE 2600 DOUGLAS ROAD PH6 CORAL GABLES, FL 33134 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 it applicable. thatE: Registered Agent signature required when reinstalling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 U00000559664 Trust Fund Contribution. Added to Fees 05/18/06-80007-019 150.00 OFFICEHS AND DIRECTORS 10. TITLE DPS MARRERO, ANTONIO NAME 14004 LAKE GEORGE CT STREET ADDRESS CITY-ST-ZIP MIAMI LAKES, FL 330143026 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-TIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 securate and that my signature shall have the same logal 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 changed, or on an attachment with productees, with all other like empowered.

SIGNATURE: X

STREET ADDRESS CITY-ST-ZIP

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED