2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2011
Secretary of State

DOCUMENT# P03000144688

Entity Name: MOVING TREASURES FRANCHISING, INC.

Current Principal Place of Business:

705 GEORGE STREET SOUTH
TARPON SPRINGS, FL 34688

New Principal Place of Business:

2519 MCMULLEN BOOTH ROAD
SUITE 510-192
CLEARWATER, FL 33761

Current Mailing Address:

705 GEORGE STREET SOUTH
TARPON SPRINGS, FL 34688

New Mailing Address:

2519 MCMULLEN BOOTH ROAD
SUITE 510-192
CLEARWATER, FL 33761

FEI Number: 20-0508887 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BINZEL, TAB C
705 GEORGE STREET SOUTH
TARPON SPRINGS, FL 34688 US

Name and Address of New Registered Agent:

BINZEL, TAB C
2519 MCMULLEN BOOTH ROAD
SUITE 510-192
CLEARWATER, FL 33761 US

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.

SIGNATURE: _____ 04/21/2011
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: BINZEL, TAB C
Address: 2519 MCMULLEN BOOTH ROAD, SUITE 510-192
City-St-Zip: CLEARWATER, FL 33761

Title: VP
Name: CASSIDY, GERALD
Address: 2519 MCMULLEN BOOTH ROAD, SUITE 510-192
City-St-Zip: CLEARWATER, FL 33761

Title: VP
Name: CLITHEROE, JAY
Address: 2519 MCMULLEN BOOTH ROAD, SUITE 510-192
City-St-Zip: CLEARWATER, FL 33761

Title: D
Name: SMITH, CHRIS
Address: 2519 MCMULLEN BOOTH ROAD, SUITE 510-192
City-St-Zip: CLEARWATER, FL 33761

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: TAB C. BINZEL P 04/21/2011
Electronic Signature of Signing Officer or Director — Date