## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000148847

Entity Name: AGHREE, INC.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 160207 P.O. BOX 940304

ALTAMONTE SPRINGS, FL 327160207 US MAITLAND, FL 327940304 US

Current Mailing Address: New Mailing Address:

P.O. BOX 160207 P.O. BOX 940304

ALTAMONTE SPRINGS, FL 327160207 US MAITLAND, FL 327940304 US

FEI Number: 43-2063057 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROY, WILLIAM GLENN JR ESQ BECKER & POLIAKOFF
411 W CENTRAL PKWY 2500 MAITLAND CENTER PARKWAY

ALTAMONTE SPRINGS, FL 32714 US SUITE 209
MAITLAND, FL 32751 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: CHRISTOPHER DRAPER 04/28/2006

Electronic Signature of Registered Agent Date

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ( ).

MAITLAND, FL 32751

City-St-Zip:

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT ( ) Delete Title: PT (X) Change ( ) Addition Name: REESS, ROBERT R REESS, ROBERT R

Address: 1000-243 WINDERLEY PLACE Address: 905-301 LOTUS VISTA DRIVE
City-St-Zip: MAITLAND, FL 32751 US City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: VS () Delete Title: VS (X) Change () Addition Name: COOVERREESS, FATMA Name: COOVERREESS, FATMA Address: 1000-243 WINDERLEY PLACE Address: 905-301 LOTUS VISTA DRIVE

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT R. REESS PT 04/28/2006

Electronic Signature of Signing Officer or Director

Date

ALTAMONTE SPRINGS, FL 32714