2006 FOR PROFIT CORPORATION ANNUAL REPORT

Sep 05, 2006 8:00 am Secretary of State DOCUMENT # P03000154853 1. Entity Name BRICK-TEK INC. 09-05-2006 90026 020 ***150.00 Principal Place of Business Mailing Address 5407 COYOTE TR 5407 COYOTE TR ORLANDO, FL 32808 ORLANDO, FL 32808 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08312006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 65-1211726 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RUNDELL, MICHAEL J Street Address (P.O. Box Number is Not Acceptable) 5407 COYOTE TR ORLANDO, FL 32808 City Zip Code 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, typed or printe (NOTE; Registered Agent signature required when reinstating) of registered agent and title if applicable. \$5.00 May Be 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Due by September 6, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition RUNDELL, MICHAEL J STREET ADDRESS 5407 COYOTE TR STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32808 CITY-ST-ZIP TITLE ☐ Detete MILE □ Change Addition ERNST, RONALD E NAME NAME STREET ADDRESS 685 E 10TH STREET STREET ADDRESS CITY-ST-ZIP APOPKA, FL 32703 CITY-ST-ZIP TITLE ☐ Delete TITLE [] Change ☐ Addition FORTIN, MICHAEL NAME NAME STREET ADDRESS 1003 SAL ST. STREET ADDRESS OCOEE, FL 34761 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITSE ☐ Delete ☐ Change ☐ Addition 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 changed, or on an attachment with an address, with all other like empowered. SIGNATURE: IG OFFICER OR DIRECTOR

FILED

ATTACHMENT 817 Aug. 31, 2006 To whom it may concern. Il regaineds to annual report filling, We never recieved renewal card only: we recieved notice of intent to dissolue. Examer informed of May 1st deadline sorry 501 any inconvience We will not soppen again