2006 FOR PROFIT CORPORATION

ANNUAL REPORT FILED Jan 10, 2006 08:00 AM DOCUMENT # P03000155981 **Secretary of State** STRONG LION, CORP Principal Place of Business Mailing Address 4528 COMMANDER DR 4528 COMMANDER DR 2036 ORLANDO, FL 32822 US ORLANDO, FL 32822 US 01052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0527962 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent RODRIGUES, MARCIO DO NOT WRITE 4528 COMMANDER DR 2036 IN THIS SPACE ORLANDO, FL 32822 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 2 (NCTE, Registered Agent signature required when reinstating) U00000382096 **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 01/11/06-80081-017 150.00 Trust Fund Contribution After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE RODRIGUES, MARCIO NAME STREET ADDRESS 4528 COMMANDER DR - 2036 CITY-ST-ZIP ORLANDO, FL 32822 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 impowered 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 en powered.

SIGNATURE: 📐

CITY-ST-ZIP

INTED NAME OF SIGNING OFFICER OR DIRECTOR