2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE

Apr 16, 2008 8:00 am Secretary of State DOCUMENT # P0400000324 04-16-2008 90039 041 ***150.00 1. Entity Name SHOP AROUND THE CLOCK, INC. Principal Place of Business Mailing Address 60025034 130 WHITAKER RD STE A 130 WHITAKER RD STE A LUTZ, FL 33549 LUTZ, FL 33549 3. Mailing Address P. O. BOX 605 2. Principal Place of Business - No P.O. Box # 21010 S.R. 54 Suite, Apt. #, etc. Suite, Apt. #, etc. 03082008 CR2E034 (12/06) City & State LUTE, FL City & State 4. FEI Number Applied For 55-0872224 Not Applicable Country Country USA \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JONES, KENNETH- -13213 TIFTON DR Street Address (P.O. Box Number is Not Acceptable) **TAMPA, FL 33618** City 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 if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DVT TITLE ☐ Delete TITLE Change ☐ Addition KHOYI, DARA NAME NAME 21010 S.R. 54 LUTZ, FL 33558 STREET ADDRESS 10012 FOUNTAIN CT STREET ADDRESS CITY-ST-ZIP NEW PT RICHEY, FL 346545815 CITY-ST-7P TITLE ☐ Delete MLE (Change ■ Addition JONES, KENNETH A MAME NAME 21010 S.R. 54 STREET ADDRESS 13213 TIFTON DR STREET ADDRESS LUTZ, FL 33558 CITY-ST-ZIP **TAMPA, FL 33618** CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition MARKE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-78P TETLE ☐ Delete TITL F 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 suppli

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