2006 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

mec

Date

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 17, 2006 8:00 am Secretary of State DOCUMENT # P04000039450 03-17-2006 90136 007 ***150.00 R&R INVESTORS OF VENICE, INC. Principal Place of Business Mailing Address 1110 VILLAGIO CIR. 14-101 168 E. BAFFIN DR SARASOTA, FL 34237 VENICE, FL 34293 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. 03062006 CR2E034 (11/05) City & State 4. FEI Number Applied For 51-0496375 Not Applicable 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 ROMEO, SONTINO 1110 VILLAGIO CIR. BLVD 14-101 Street Address (P.O. Box Number is Not Acceptable) SARASOTA, FL 34237 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Р TITLE Delete TITLE Addition ☐ Change NAME ROMEO, SONTINO 561 Falkland Rd STREET ADDRESS 1110 VILLAGIO CIR. BLVD 14-101 STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34237 CITY-ST-ZIP Venice FL 34293 TITLE ☐ Delete TITLE ☐ Change ☐ Addition ROMEO, BARRY NAME NAME STREET ADDRESS 447 WHEAT RD STREET ADDRESS CITY-ST-ZIP VINELAND, NJ 083609635 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME 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

FILED