2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 24, 2006 08:00 AM DOCUMENT # P04000042083 **Secretary of State** 1. Entity Name CHARLES E. GARRIS P.A. Principal Place of Business Mailing Address 819 BEACHLAND BLVD. 819 BEACHLAND BLVD. VERO BEACH, FL 32963 VERO BEACH, FL 32963 02222006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. EEL Number 20-0834860 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARRIS, CHARLES E DO NOT WRITE 819 BEACHLAND BLVD. VERO BEACH, FL 32963 IN THIS SPACE 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 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE GARRIS, CHARLES E ESQ. NAME STREET ADDRESS 819 BEACHLAND BLVD CITY-ST-ZIP VERO BEACH, FL 32963 TITLE HDUUH0446769 NAME 93/08/06 80025-020 150.00 STREET ADDRESS City-St-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP DILE

12. Thereby certify that the information supplied with this filling 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 direct 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 changed, or on an attachment with an address, with attachment with an address, with attachment with an address, with attachment with an address.

SIGNATURE: _

NAME STREET ADDRESS CITY-S1-ZIP

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