2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 15, 2008 8:00 am DOCUMENT # P04000043541 **Secretary of State** 1. Entity Name 02-15-2008 90015 043 ***150.00 STEBRO HOLDINGS, INC. Principal Place of Business Mailing Address 1841 S.E. 7THSTREET FORT LAUDERDALE FL 33316 1841 S.E. 7TH STREET FORT LAUDERDALE FL 33316 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 1st MOORE CR2E034 (10/07) City & State City & State 4. FE! Number Applied For 86-1110101 Not Applicable \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BROCK, RANDOLPH F Street Address (P.O. Box Number is Not Acceptable) **1841 S.E. 7TH STREET** FORT LAUDERDALE FL 33316 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. (NOTE: Registered Apart signature required when reinstitling) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE TITLE ☐ Addition ☐ Change NAME BROCK, RANDOLPH F NAME 1841 S.E.7TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33316 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIT: F Delete TELLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CUTY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

FILED

RANDOLPH BLOCK 2/8/08 954-647.8017