2006 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Apr 28, 2006 08:00 AM Secretary of State DOCUMENT # P04000055484 1. Entity Name DECARR ENTERPRISES, INC. Mailing Address Principal Place of Business 1774 CONCERT ROAD 1774 CONCERT ROAD DELTONA, FL 32738 DELTONA, FL 32738 No Chg-P CR2E034 (11/05) 03132006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 72-1580814 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DECARR, ANN 1774 CONCERT ROAD DELTONA, FL 32738 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) U00000543314 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 05/10/06-80132-025 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE DECARR, LOUIS NAME 1774 CONCERT ROAD STREET ADDRESS DELTONA, FL 32738 CITY-ST-ZIP DST TOLE DECARR, ANN NAME 1774 CONCERT ROAD STREET ADDRESS CATY-ST-EP DELTONA, FL 32738 717t # MARAT STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS

12. I hereby 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 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.

SIGNATURE:

CITY-\$7-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP