2007 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 28, 2007 08:00 AM DOCUMENT # P04000060636 **Secretary of State** 1. Entity Name WILLBYRD CORP. Principal Place of Business Mailing Address 21855 CYPRESS PALM COURT 21855 CYPRESS PALM COURT BOCA RATON, FL 33428 BOCA RATON, FL 33428 No Chg-P 03232007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 35-2229247 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent FRITH, BARRON G JR. DO NOT WRITE 21855 CYPRESS PALM COURT BOCA RATON, FL 33428 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) //00000681595 04/04/07-80049-011 158.75 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. n TITLE FRITH, BARRON G JR. NAME STREET ADDRESS 21855 CYPRESS PALM COURT BOCA RATON, FL 33428 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TELE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

Baum B. Full h

3-23-07

561-479-3578

FILED