2006 FOR PROFIT CORPORATION **ANNUAL REPORT DOCUMENT # P04000062714** 1. Entity Name VIRGINIA STREET FULTON, INC.

FILED Apr 05, 2006 08:00 AM Secretary of State



Principal Place of Business 3006 AVIATION AVE. #3A 3006 AVIATION AVE. #3A MIAMI, FL 33133 MIAMI, FL 33133 CR2E034 (11/05) 03272006 No Chg P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-2444960 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PANTIN, MARIA DO NOT WRITE 3125 JACKSON AVE MIAMI, FL 33133 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agem, 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 are if applicable. (TFC/TE: Registered Agent signature required when reinstating) CATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 000000493616 Trust Fund Contribution. Added to Fees 84/2<u>8/0</u>6-80013-009 150.00 OFFICERS AND DIRECTORS 10. FULTON, STANLEY M NAME 3006 AVIATION AVE. #3A STREET ADDRESS CHIY-ST-ZIP MIAMI, FL 33133 THE NAME PANTIN, MARIA T 3006 AVIATION AVENUE SUITE 3A STREET ADDRESS City-St-Zip MIAMI, FL 33133 TITLE MAM STREET ADDRESS DO NOT WRITE CITY-ST-ZIP 33111 IN THIS SPACE MARKE STREET ADDRESS CRY-ST-ZP Ditt NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS COY-ST-2IP

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 shell have the same legal effect as if made under oath; that I am an atticet or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylyne Phone 9