2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 24, 2006 8:00 am Secretary of State 04-24-2006 90350 031 ***150.00 DOCUMENT # P0400063210 MEL-LAURN QUICK SHOP, INC. Principal Place of Business Mailing Address 60029194 2100 FIRST STREET NORTH 1542 WHITNEY ISLES DRIVE WINTER HAVEN, FL 33881 WINDERMERE, FL 34786 04172006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1542095 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LABBAN, FELIX DO NOT WRITE . . 1542 WHITNEY ISLES DRIVE WINDERMERE, FL 34786 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) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution, Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME LABBAN, FELIX *STREET ADDRESS 1542 WHITNEY ISLES DRIVE CITY-ST-ZIP WINDERMERE, FL 34786 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 fouried by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with graduess, with all other like empoyered.

SIGNATURE:

TITLE

STREET ADDRESS CITY-ST-ZIP

FILED