2007 FOR PROFIT CORPORATION

FILED Jan 17, 2007 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # P04000086851 FRED HARAMBOURE, INC. Principal Place of Business Mailing Address 3115 S. POLK AVENUE 3115 S. POLK AVENUE LAKELAND, FL 33803 LAKELAND, FL 33803 01092007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 41-2140453 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent HARAMBOURE, ALFREDO P DO NOT WRITE 3115 S. POLK AVENUE LAKELAND, FL 33803 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) FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS HARAMBOURE, ALFREDO P NAME STREET ADDRESS 3115 S. POLK AVENUE U00000588968 CITY-ST-ZIP LAKELAND, FL 33803 01/17/07-80093-018 150.00 NAME STREET ADDRESS TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby 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

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

1-10-07 B63-521-2319