2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 12, 2006 8:00 am Secretary of State DOCUMENT # P04000091838 04-12-2006 90085 025 ***158.75 JEFFREY A. MARCUM, INC. Principal Place of Business Mailing Address 2805 60TH STREET EAST PALMETTO FL 34221 PO BOX 1842 BRADENTON FL 34206 2. Principal Place of Business Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State; Ho City & State Applied For 51-0513075 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARCUM, JEFFREY A Street Address (P.O. Box Number is Not Acceptable) 2805 60TH STREET EAST PALMETTO FL 34221 Zip Code City 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 4-6-6 DATE SIGNATURE (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00-9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Change ☐ Delete Addition NAME MARCUM, JEFFREY A NAME STREET ADDRESS 4300 18 ST W #A-205 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34205** ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE HILE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Chance Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 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 it made under cath; 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.

4. 6. 6. 941-720-6853 Date Date Dayland Phone 4

FILED