2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jun 04, 2008 8:00 am Secretary of State DOCUMENT # P04000091955 06-04-2008 90008 039 ***150.00 BUDGET COMPRESSORS, INC. Principal Place of Business Mailing Address PO BOX 4301 2021 NW 29TH ST OAKLAND FL 33311 DEERFIELD BEACH FL 33442 3. Mailing Address 2. Principal Place of Business - No P.O. Box # PO BOX 4301 P6 B6X 4301 WESTBURY Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/08) DEER FIELD City & State City & State 4. FEI Number Applied For 20-1261781 DEER FIELD DEERFIELD Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 13)ROWARD Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MATAN, ARI Street Address (P.O. Box Number is Not Acceptable) 2021 NW 29TH ST OAKLAND PARK FL 33311 Zip Code 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 9500 00 - 150 \$.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 3, 2008 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees did not receive prior notice. Fee to file is \$150.00. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE מי ☐ Delete TITI F ☐ Change Addition NAME NAME MATAN, ARI STREET ADDRESS STREET ADDRESS P.O. BOX 4301 CITY-ST-ZIP DEERFIELD BEACH FL 33442 CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITI F Change Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Delete TIFLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

FILED

ATTACHMENT

BUDGET COMPRESSORS 2021 NW 29th St Oakland Park FL 33311

Fax: 954-571-2383

MAY /28/08

ATTN: MS. MISHELL MILIGAN 40 DIVISION OF CORPORATION

RE! REQUEST FOR NORMALL FEE

ON MARCH 2007 I MAILED YOU # POSTCARD REQUESTING FORMS BY MAIL NOTHING HAPPANED

ON APRIL I TRIED TO DONLOWING D DOCUMENT FROM INTERNET = NOTHING (HAPPANED

ON APRIL 22 OR SO F MILED YOU THE OTHER & OF THE POST CARD WITH A CHECK \$150

2327 DATED 5/1/0P CHECK WASN'T CHEAR YET.

ON MAY 27 F CALLED

GUYS AND I WAS TOLD TO

MANY THANKS

SEND THIS LETTER FUCLOSE IS

MANY THANKS

ARI

MATAN

2340 \$ (50)

BUDGET COMPRESSOR