2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 01, 2006 08:00 AM Secretary of State **DOCUMENT # P04000121985** 1. Entity Name R MICKLEY WOODWORKING INC Mailina Address Principal Place of Business 15796 129TH TERRACE NORTH 15796 129TH TERRACE NORTH JUPITER, FL 33478 NPITER, FL 33476 CR2E034 (11/05) 04202006 Na Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1009330 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MICKLEY, ROBERT DO NOT WRITE 15798 129TH TERRACE NORTH JUPITER, FL 33478 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. of registroit agent and Me if applicable (NOTE Registered Agent signature required when reinetating) 9. Election Campaign Financing \$5.00 May Bo FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PAP TITLE. MICKLEY, ROBERT D U00000547570 05/12/06-80030-004 150.00 STREET ADDRESS 15796 129TH TERRACE NORTH JUPITER, F 33478 CITY-ST-289 MLE S,T MICKLEY, CAROLYN HAME STRUET ADDRESS 15796 129TH TERRACE NORTH CITY-ST-ZIP JUPITER, FL 33478 TITLE NAME STREET HODRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP mit NAME STREET ADDRESS 017Y-57-28P TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 118, 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 eath, that I am an officer or director of the curporation or the receiver or frustee 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.

SIGNATURE AND TYPED OR PROMED WANE OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

561-747-0463