2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

03-30-2007 90140 016 ***150.00 **DOCUMENT # P04000137139** 1. Entity Name COTTON COMPANY 100 INC. 40045833 Mailing Address Principal Place of Business 3540 FOREST HILL BLVD. #203 3540 FOREST HILL BLVD. #203 WEST PALM BEACH, FL 33406 WEST PALM BEACH, FL 33406 Principal Place of Business - No P.O. Box 5 NO ()(ean Suite, Apt. #, etc. 03072007 CR2E034 (12/06) Chg-P #310 Applied For City & State 4. FEI Number 20-1916592 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent *corde* ω . DENTRY, DEBORAH A Street Address (P.O. Box Number is Not Acceptable) 3540 FOREST HILL BLVD, #203 WEST PALM BEACH, FL 33406 Sinack Island 8. The above named entity supmits 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 regi-1) Heaton 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Р ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME HEATON, GEORGE W NAME STREET ADDRESS STREET ADDRESS 2655 NORTH OCEAN DR #310 CITY-ST-ZIP SINGER ISLAND, FL 33404 CITY-ST-ZIP VPST TITLE Delete TITLE Change ☐ Addition DENTRY, DEBORAH NAME NAME 3540 FOREST HILL BLVD STREET ADDRESS STREET ADDRESS CITY+ST-7IP WEST PALM BEACH, FL 33406 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-S1-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P ☐ Delete ☐ Change ☐ Addition TITLE TITLE 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. 3/20/0-

FILED Mar 30, 2007 8:00 am

Secretary of State