2006 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

SIGNATURE:

FILED May 01, 2006 08:00 AM Secretary of State

DOCUMENT # P04000140799 1. Entity Name CHRISTOPHER WHITE GROUP, INC.					Secret	ary or S	otate
Principal Place 6848 NORTH TAMARAC, FL	I UNIVERSITY DRIVE	Mailing Address 6848 NORTH UNIVERSITY DRI TAMARAC, FL 33321 US	Æ	1 (2) 1 4 8 (2) 14 (2)	ISS RINGS BUILS RUIS RUIS	R KERIL BERIL BERIL SEMIN	E SINSKIË (INSKINGEN SE SINDE)
	And the second s			04252008	No Chg-F	CR2E034 (1	. cour course, il labo
_ D	O NOT WRITE	IN THIS SPA	CE	4. FEI Number 03-0556			Applied For Not Applicab
	6. Name and Address of Current Re	relational Accept		5. Certificate o	Status Desired		5 Additional equired
6848 NOR	HRISTOPHER TH UNIVERSITY DRIVE C, FL 33321	pysiereu Agent		1.0	VOT W	•	
6. The above the obligati	named entity submits this statement for too solves of registered agent.	he purpose of changing its register	ed office or register	ed agent, or both	in the State of Flo	rida. I am famille	ir with, and accep
SIGNATURE_	Signature, typed or printed name of registered agent and	tive it applicable. (NOTE: Registere	ed Agent signature required	I when reinstating)		DATE	
FIL	Signature, typed or printed name of registered egent and E NOWILL FEE IS \$150.00 by 1, 2006 Fee will be \$550.00	9. Election Campaign Final	noing\$5.	00 May Be ed to Fees	,	DATE	
FIL	E NOW!!! FEE IS \$150.00	Election Campaign Final Trust Fund Contribution.	noing\$5.	.00 May Be		DATE	
FIL After Mi	E NOWILL FEE IS \$150.00 BY 1, 2006 Fee will be \$550.00 OFFICERS AND D P WHITE, CHRISTOPHER 6848 N UNIVERSITY DRIVE	Election Campaign Final Trust Fund Contribution.	noing\$5.	.00 May Be		DATE	
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental apport 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 resolver of truetee 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 any address, with all other like empowered.

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

28/06

Daytime Phone #