2007 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P05000007259 05-01-2007 90023 014 ***150.00 THE FORUM ENTERPRISES INC Mailing Address Principal Place of Business 13961 SW 122 AVE 40000---13961 SW 122 AVE 206 MIAMI, FL 33186 MIAMI, FL 33186 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 4085 Forest Hill Drive 4085 Forest Hill Drive Suite, Apt. #, etc. Suite, Apt. #, etc. 04052007 Chg-P CR2E034 (12/06) City & State 4. FEI Number Applied For Cooper City 33-1109739 Not Applicable soo or r \$8.75 Additional 5. Certificate of Status Desired ()SA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUSSELL, RADUENZ 13961 SW 122 AVE Street Address (P.O. Box Number is Not Acceptable) #206 MIAMI, FL 33186 City Cooper City Zip Code 33924 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. Russell Raduenz (NOTE: Registered Agent 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 · 11. Delete IIILE TITL F RADUENZ, RUSSELL 4085 Forest Hill Drive STREET ADDRESS 13961 SW 122 AVE., #206 STREET ADDRESS MIAMI, FL 33186 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TILE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete mne TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Addition □ Delete TTDE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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. SIGNATURE: PED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

FILED

May 01, 2007 8:00 am

Russell Radvenz, President