2007 FOR PROFIT CORPORATION

Apr 19, 2007 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # P05000010929** 04-19-2007 90194 007 ***158.75 FORESIGHT INVESTMENT CORPORATION Mailing Address Principal Place of Business 17830 NE 5TH AVE 17830 NE 5TH AVE NORTH MIAMI BEACH, FL 33162 NORTH MIAMI BEACH, FL 33162 2. Principal Place of Business - No P.O. Box # Mailing Address O DO 1765 NW 185Th TEARACE Suite, Apt. #, etc. Suite, Apt. #, etc 04162007 CR2E034 (12/06) City & State 4. FEI Number Applied For City & State 54-2168518 Not Applicable Miami, I \$8.75 Additional Zip Country 5. Certificate of Status Desired 33056 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent J. Lewis MELISSA LEWIS, MELISSA J Street Address (P.O. Box Number is Not Acceptable) 17830 NE 5TH AVE NORTH MIAMI BEACH, FL 33162 FL Zip Code 33056 City Migmi is terest agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this statement for the purpose of changing its gistered off the obligations of registered agent. APR 1-6 2007 SIGNATURE ME/ISSA T. Lewis, V.A. Sgreaue, typed or privated nerns of registered applicated applications. (NOTE: Registered Agent sig required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. CEOP Delete TITE F ☐ Change ☐ Addition TITLE LEWIS, SILIENA D NAME NAME STREET ADDRESS 3120 NW 205TH TERRACE STREET ADDRESS CITY-ST-ZIP C/TY-ST-ZIP OPA LOCKA, FL 33056 VΡ ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME LEWIS, MELISSA J NAME STREET ADDRESS 1765 NW 185TH TERRACE STREET ADDRESS MIAMI, FL 33056 CITY-ST-ZIP CITY-ST-ZEP ST TITLE ☐ Delete TITI F Change Addition LEWIS, MONICA I NAME NAME STREET ADDRESS 1765 NW 185TH TERRACE STREET ADDRESS MIAMI, FL 33056 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition LEWIS, BILLY J NAME NAME STREET ADDRESS 8652 SOUTHAMPTON DR STREET ADDRESS CITY-ST-ZIP MIRAMAR, FL 33025 CITY-ST-ZIP TITLE Change Addition Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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12. Thereby 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 trusted my ownered 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.

CITY-ST-ZIP

City-St-ZIP

SIGNATURE: