## 2007 FOR PROFIT CORPORATION

STREET ADDRESS CITY-ST-ZIP

May 02, 2007 08:00 A Secretary of State ANNUAL REPORT DOCUMENT: # P05000024370 1. Entity Name BEAR BOOTS, INC. Principal Place of Business Mailing Address 7740 ULMERTON RD 7740 ULMERTON RD LARGO, FL 33771 LARGO, FL 33771 No Chg-P CR2E034 (11/05) 04272007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3079047 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SMILEY, R.W. DO NOT WRITE 1351 OHIO AVE DUNEDIN, FL 34698 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature 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 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE BROWN, BARRY NAME 7740 ULMERTON RD STREET ADDRESS CITY-ST-ZIP LARGO, FL 33771 TITLE NAME STREET ADORESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITI F 1000000756005 NAME /05/23/07-80013-002-150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME

- FILED

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. SIGNATURE: Daytime Phone 6 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR