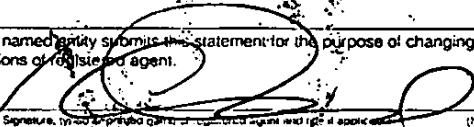
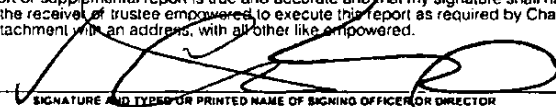


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2006 8:00 am
Secretary of State

04-27-2006 90171 012 ***150.00

DOCUMENT # P05000026232 1. Entity Name REICHART & ASSOCIATES, P.A.																									
Principal Place of Business 8525 NW 45TH STREET CORAL SPRINGS, FL 33065			Mailing Address 8525 NW 45TH STREET CORAL SPRINGS, FL 33065																						
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																							
City & State Zip Country		City & State Zip Country		4. FEI Number 54-2188240																					
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable																					
6. Name and Address of Current Registered Agent CASACCI, JOSEPH R. ESQ. 1000 S. ANDREWS AVE. FT. LAUDERDALE, FL 33316			7. Name and Address of New Registered Agent Name Chris-Reichert Street Address (P.O. Box Number is Not Acceptable) 8525 NW 45th Street City Coral Springs FL Zip Code 33065																						
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  DATE 4-24-06 (NOTE: Registered Agent signature required when reinstating)																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing ☐ Trust Fund Contribution. \$5.00 May Be Added to Fees																						
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%;">STREET ADDRESS</td> <td style="width:10%;">CITY - ST - ZIP</td> <td style="width:10%; text-align: right;">Delete</td> </tr> <tr> <td></td> <td>DP REICHART, CHRIS</td> <td>8525 NW 45TH STREET</td> <td>CORAL SPRINGS, FL 33065</td> <td>☐</td> </tr> </table>			TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete		DP REICHART, CHRIS	8525 NW 45TH STREET	CORAL SPRINGS, FL 33065	☐	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">NAME</td> <td style="width:10%;">STREET ADDRESS</td> <td style="width:10%;">CITY - ST - ZIP</td> <td style="width:10%; text-align: right;">Change Addition</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐ ☐</td> </tr> </table>			TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change Addition					☐ ☐
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				☐ ☐																					
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:  Date 4-24-06 Daytime Phone #																						