2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000026476

Entity Name: NEGOTIATED MARKET EXCHANGE, INC.

FILED Aug 15, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16059 E. GOLD CUP DR 3431 RED ROCK DR LOXAHATCHEE, FL 33470 LAND O' LAKES, FL 34639

Current Mailing Address: New Mailing Address:

16059 E. GOLD CUP DR 3431 RED ROCK DR LOXAHATCHEE, FL 33470 LAND O' LAKES, FL 34639

FEI Number: 93-1334867 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

A1A REGISTERED AGENT INC. HOLLISTER, WILLIAM CPA 92 SADBERRY RD 8001 N. DALE MABRY HWY QUINCY, FL 32351 US TAMPA, FL 33614

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.

SIGNATURE: WILLIAM HOLLISTER, CPA 08/15/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change () Addition SORROW, STEPHEN J SORROW, HENRY A Name: Name: 6311-4 RIVERWALK LN 3431 RED ROCK DR. Address: Address: LAND O' LAKES, FL 34639 City-St-Zip: JUPITER, FL 33458 City-St-Zip:

Title: Title: VΡ () Delete (X) Change () Addition

SORROW, ANDREW Name: Name: SORROW, AUTUMN J 6311-4 RIVER WALK LN 6311-4 RIVER WALK LN Address: Address: JUPITER, FL 33458 JUPITER, FL 33458 City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition

SORROW, AUTUMN J Name: Name: 6311-4 RIVER WALK LN Address: Address: City-St-Zip: JUPITER, FL 33458 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HENRY A. SORROW **PRES** 08/15/2006