2006 FOR PROFIT CORPORATION ANNUAL REPORT

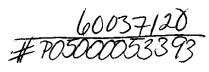
SIGNATURE: \(\)

May 05, 2006 8:00 am Secretary of State 05-05-2006 90183 030 ***150.00 DOCUMENT # P05000053393 MBC HOLDINGS OF FLORIDA, INC. 60037140 Principal Place of Business Mailing Address 5425 NEW JERSEY AVE 5425 NEW JERSEY AVE DELOEN SPRINGS, FL 32130 DELOEN SPRINGS, FL 32130 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272006 Chg-P CR2E034 (11/05) Applied For City & State City & State 4. FEI Number 20-2689526 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE !S \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DΡ TITLE Delete TITLE ☐ Change ☐ Addition NAME MILLER, ROBERT W NAME STREET ADDRESS 5425 NEW JERSEY AVE STREET ADDRESS **DELOEN SPRINGS, FL 32130** CITY-ST-ZIP CITY-ST-ZIP DΛ TITLE Delete TITLE ☐ Change ■ Addition MILLER, DEAN E NAME NAME STREET ADDRESS 275 MONTEREY DRIVE STREET ADDRESS CITY-ST-7IP NAPLES, FL 34119 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME **EVERHART, STEVEN A** NAME STREET ADDRESS 1613 SOUTH DEFIANCE STREET STREET ADDRESS CITY-ST-ZIP ARCHBOLD, OH 43502 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P 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 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 acutes." with all other like in movement

Date

FILED

ATTACHMENT



STATE TAX RETURN FILING INSTRUCTIONS

2006 FOR PROFIT CORPORATION ANNUAL RETURN

Prepared for

MBC Holdings of Florida, Inc. 5425 New Jersey Ave. Deloen Springs, FL 32130

Prepared by

Plante & Moran, PLLC P.O. BOX 353090 TOLEDO, OHIO 43635-3090 (419) 843-6000

Amount of tax

- 1. Your refund is \$ 0.00.
- 2. Your overpayment applied to next year is \$ 0.00.
- 3. Your balance due is \$ 150.00.

Make check payable to

Florida Department of State

Mail tax return to

Divisions of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

An envelope with the proper address is enclosed for your convenience.

Return must be mailed on or before

May 1, 2006

Special Instructions

Please note the following checked items.

X

1. Sign and date the return.

X

2. Write your federal identification number/social security number on the check.

X

3. Place your copy in safe keeping.

4. Other