2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# P05000063201

Entity Name: LOFTEN POOL SERVICE INC.

Current Principal Place of Business:

PO BOX 5875
LAKE WORTH, FL 33466

New Principal Place of Business:

PO BOX 541687
LAKE WORTH, FL 33454 US

Current Mailing Address:

PO BOX 5875
LAKE WORTH, FL 33466

New Mailing Address:

PO BOX 541687
LAKE WORTH, FL 33454 US

FEI Number: 41-2174646 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOFTEN, BRIAN
3764 HEATHER DRIVE EAST
GREEN ACRES, FL 33463 US

Name and Address of New Registered Agent:

LOFTEN, BRIAN
3764 HEATHER DRIVE EAST
GREENACRES, FL 33463 US

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: 04/26/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LOFTEN, BRIAN
Address: PO BOX 5875
City-St-Zip: LAKE WORTH, FL 33466

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LOFTEN, BRIAN
Address: PO BOX 541687
City-St-Zip: LAKE WORTH, FL 33454 US

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: BRIAN LOFTEN P 04/26/2006
Electronic Signature of Signing Officer or Director — Date