2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000099309

Entity Name: LET'S GET TOGETHER EVENTS, INC.

FILED Aug 25, 2006 Secretary of State

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

3314 HENDERSON BLVD. SUITE 207

US

TAMPA, FL 33603 TAMPA, FL 33609

Current Mailing Address: New Mailing Address:

3314 HENDERSON BLVD. 219 WEST EMILY STREET SUITE 207 TAMPA, FL 33603 US TAMPA, FL 33609

FEI Number: 20-3202376 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:

PIECHOWIAK, STEPHANIE PIECHOWIAK, STEPHANIE 3412 WEST SANTIAGO STREET 219 WEST EMILY STREET TAMPA, FL 33629 TAMPA, FL 33603

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: 08/25/2006

> 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:

219 WEST EMILY STREET

Title: () Delete Title: (X) Change () Addition PIECHOWIAK, STEPHANIE PIECHOWIAK, STEPHANIE Name: Name: 3412 WEST SANTIAGO STREET Address: 219 WEST EMILY STREET Address: TAMPA, FL 33603 US City-St-Zip: TAMPA, FL 33629 US City-St-Zip:

Title: VP,T Title: (X) Change () Addition () Delete

Name: MCLAY, SHANNON Name: MCLAY, SHANNON 1006 EDISON PARK CT. Address: 4914 MENDENHALL DRIVE Address: TAMPA, FL 33606 US TAMPA, FL 33603 US City-St-Zip: 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: STEPHANIE B. PIECHOWIAK P, S 08/25/2006