2007 FOR PROFIT CORPORATION . ANNUAL REPORT .

Apr 23, 2007 08:00 AM Secretary of State DOCUMENT # P05000111900 GATOR CURBING & RESCREENING, INC. Principal Place of Business Mailing Address 3031 ARROWHEAD RD 3031 ARROWHEAD RD VENICE, FL 34293 VENICE, FL 34293 04122007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3341254 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SELL, GREGORY DO NOT WRITE 3031 ARROWHEAD RD VENICE, FL 34293 IN THIS SPACE 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 (NOTE: Registered Agent signature required when reinstating) U0000007218994 05/01/07-80154-010 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS DP TITLE NAME SELL, GREGORY STREET ADDRESS 3031 ARROWHEAD RD CISY-ST-7IP VENICE, FL 34293 D\$ TITLE NAME SELL, DANIEL STREET ADDRESS 3031 ARROWHEAD RD CITY-ST-7IP VENICE, FL 34293 TIT) F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TIT: F IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TY ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/07 941-497-445C

FILED