

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000121678

Entity Name: WHITE TOQUE, INC.

FILED
Feb 24, 2006
Secretary of State

Current Principal Place of Business:

4375 WILLOW POND CIRCLE
WEST PALM BEACH, FL 33145

New Principal Place of Business:

188 LONE PINE DRIVE
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

4375 WILLOW POND CIRCLE
WEST PALM BEACH, FL 33145

New Mailing Address:

188 LONE PINE DRIVE
PALM BEACH GARDENS, FL 33410

FEI Number: 20-3784275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

THE CULLEN LAW FIRM, P.A.
2090 PALM BEACH LAKES BLVD.
SUITE 400
WEST PALM BEACH, FL 33409 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: MARK CULLEN

02/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARLINO, JOHN
Address: 4375 WILLOW POND CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33145

Title: VSTD (X) Delete
Name: CONWAY, DAVID P
Address: 4375 WILLOW POND CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CARLINO, JOHN A
Address: 188 LONE PINE DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Change () Addition
Name:
Address:
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: JOHN A. CARLINO

PD

02/24/2006

Electronic Signature of Signing Officer or Director

Date