2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Aug 15, 2008 8:00 am Secretary of State

Daytime Phone #

Principal Place of Business 1900 NW 33RD COURT 12 POMPANO BEACH, FL 33064 US 2. Principal Place of Business - No P.O. Box #
12 POMPANO BEACH, FL 33064 US 2. Principal Place of Business - No P.O. Box # 3. Majing Address / W 33 R D C Suite, Apl. #, etc. Suite, Apl. #, etc. O7232008 Chg-P CR2E034 (12/06) Silite, Apl. #, etc. O7232008 Chg-P CR2E034 (12/06) Not Applied For O4-3826782 Silite, Apl. #, etc. O7232008 Chg-P CR2E034 (12/06) Silite, Apl. #,
POMPANO BEACH, FL 33064 US 2 Principal Place of Business - No P.O. Box # 3 Mailing Address # 3 R P C
Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. App. #, etc. #, etc. Suite. Applicable. Suite. Applicabl
Applied For Not Applicable Zip 37067 Suntry Zip 33063 Suntry 6. Name and Address of Current Registered Agent Name Address of New Registered Agent Name Address of New Registered Agent Name Address (P.O. Box Number is Net Asceptable) Street Address (P.O. Box Number is Net Asceptable) 12 POMPANO BEACH, FL 33064 City August 1 School PL 29 City August 1 School PL 29 City August 1 School PL 29 Signature, typed or printed name of registered agent and tide if applicable. (NOTE: Registered Agent signature required when reinstating) PAPPING FOR Not Applicable Applied For Not Applicable Step Required 7. Name and Address of New Registered Agent Name Poblet Suppose Plants Step Address (P.O. Box Number is Net Asceptable) City August 1 School PL 29 Signature, typed or printed name of registered agent and tide if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 PAPPING TO 44-3826782 Not Applied For Not Applicable Not Applicable Not Applicable Step Addritional Fee Required The Address of New Registered Agent Name Poblet Suppose Plants Suppose Poblet Suppose Plants Not Applicable Step Addritional Fee Required The Address of New Registered Agent Name Poblet Suppose Plants Suppose Plants Suppose Plants Not Applicable Suppose Plants Not Applicable Not Applicable Not Applicable Not Applicable Not Applicable Not Applicable The Address of New Registered Agent Name Poblet Suppose Plants Suppose Plants Suppose Plants Not Applicable Name Poblet Suppose Plants Suppose Plants Suppose Plants Not Applicable Name Poblet Suppose Plants Sup
City Country City Country City C
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Robert SWORD, ROBERT 1900 NW 33RD COURT 12 POMPANO BEACH, FL 33064 City Robert Steel Address (P.O. Box Number is Not Asceptable) City Robert Steel Address (P.O. Box Number is Not Asceptable) FL 3304 Ft 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, typeo or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the
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10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE P Delete TITLE Change Addition
NAME SWORD, ROBERT G NAME STREET ADDRESS 7715 NW 1ST STREET STREET ADDRESS
CITY-ST-ZIP MARGATE, FL 33063 CITY-ST-ZIP
TITLE D Delete THILE Change Addition
NAME MAGEE, ROBERT W NAME STREET ADDRESS 2721 SW 16TH COURT STREET ADDRESS
CITY-ST-ZIP FT. LAUDERDALE, FL 33312 CITY-ST-ZIP
TITLE Delete TITLE Change Addition
NAME NAME STREET ADDRESS STREET ADDRESS
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TITLE Delete TITLE Change Addition
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STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP
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.