Feb 28, 2008 8:00 am **Secretary of State** 2008 FOR PROFIT CORPORATION **ANNUAL REPORT** 02-28-2008 90016 016 ***150.00 **DOCUMENT # P05000151366** LAW OFFICES OF HUGO J. CONCHA, P.A. 4000200-Mailing Address Principal Place of Business 211 SOUTH 2ND STREET 211 SOUTH 2ND STREET FT. PIERCE, FL 34950 FT. PIERCE, FL 34950 01172008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3810449 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CONCHA, HUGO J DO NOT WRITE 211 SOUTH 2ND STREET FT. PIERCE, FL 34950 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) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PD NAME CONCHA, HUGO J 250 CHAMPAGNE CT. SW STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32968 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 regeiver or trustee encoward 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:

TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

2/26/08

772) 461-6211

FILED

Daytime Phone #