2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000158346

FILED Mar 07, 2007 8:00 am Secretary of State 03-07-2007 90013 036 ***150.00

Daytene Phone #

Dale

| 1. Entity Nam GRETE, I | | | | | | | |
|---|--|----------------------------------|---|--|----------------------|---------------------------------------|-----------------------------|
| Principal Place of Business Mailing Address 1318 LAFAYETTE STE 1318 LAFAYETTE STE CAPE CORAL, FL 33904 CAPE CORAL, FL 33904 | | | | 40 | Ս ՀՄԾՆԾ | | |
| 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 1221 SW 104h 7 | | | h Ter | | | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | 02262007 | Chg-P | CR2E034 (12/06) | |
| City & Chat | Myers, Florida | Cape Coral, Florida | | 4. FEI Numb 9 20-387 | | | pplied For at Applicable |
| Zip 33 <i>9</i> | Country // CA | ^{Zip} 33991 | Country U.S. | | of Status Desired | \$8.75 Add | |
| 75 / | 6. Name and Address of Current F | <u> </u> | | | d Address of New R | · · · · · · · · · · · · · · · · · · · | |
| HILL, THOMAS W | | | | | | | |
| 1318 LAFAYETTE STE CAPE CORAL, FL 33904 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | |
| City Cape Coral | | | | | | | 3991 |
| 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. Lam familiar with, and accept | | | | | | | |
| the obligations of registered agent. SIGNATURE 2-26-07 | | | | | | | |
| SIGNATORE | Signature, typed or printed name of registered agent a | nd title if applicable. (NOTE: F | Registered Agent signature r | required when reinstating) | T | DATE | |
| FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees | | | | | | | |
| 10. | OFFICERS AND I | | 11. | ADDITIONS | /CHANGES TO OFF | ICERS AND DIRECTOR: | |
| TITLE NAME | FRANKE, LOTHAR | Delete | TITLE NAME | | | | Addition |
| STREET ADDRESS | | | | 1221 SW 10th Ter Cape Coral, FL 33991 | | | |
| CITY-ST-ZIP | CAPE CORAL, FL 33904 SD | ∭ Delete | TITLE | cape core | 14,72 33 | ☐ Change | Addition |
| NAME | HILL, THOMAS W | ~~~ | NAME | | | • | |
| STREET ADDRESS CITY+ST-ZIP | 1318 LAFAYETTE STE CAPE CORAL, FL 33904 | | STREET ADDRESS CITY-ST-ZIP | | | | |
| TITLE | | ☐ Delete | TITLE S | <u> </u> | | Change | Addition |
| NAME STREET ADDRESS | | | NAME C | Kiver Aut 1221 SW 10 | ther th Tor | | |
| CITY-S1-ZIP | | | CITY-ST-ZIP | Oliver Hul 1221 SW 10 Cape Coral | , FL 339 | 9/ | |
| TITLE | | ☐ Delete | TITLE | | | ☐ Change | ☐ Addition |
| NAME STREET ADDRESS | | | NAME STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | | | |
| TITLE NAME | | ☐ Delete | TITLE NAME | | | ☐ Change | ☐ Addition |
| STREET ADDRESS | | | STREET ADDRESS | | | | } |
| TITLE | | ☐ Delete | CITY-SI-ZIP TITLE | | | ☐ Change | Addition |
| NAME | | | NAME | | | Onunge | Fedition |
| STREET ADDRESS CITY-ST-ZIP | | | STREET ADDRESS CITY-ST-ZIP | | | | |
| 12. Thereby | Lecrify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo | true and accurate and that my | the exemptions con signature shall have | e the same legal effe | ect as if made under | oath; that I am an officer | r or director |
| changed, or on an attachment with an address, with all other like empowered. | | | | | | | |
| SIGNATURE: 2-28-07 SIGNATURE: Dale Daytime Phone # | | | | | | | |