2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 28, 2007 8:00 am Secretary of State 03-28-2007 90013 032 ***150 00 DOCUMENT # P06000035623 1. Entity Name OPTIMAL CAPITAL CORPORATION 40049946 Principal Place of Business Mailing Address 21410 TOWN LAKES DRIVE 21410 TOWN LAKES DRIVE 916 916 BOCA RATON, FL 33486 BOCA RATON, FL 33486 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 9261 W. Sumrise Blvd. 9261 W. Sunrise Blvd Suite, Apt. #, etc. Suite, Apt. #, etc. 03252007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For Plantation, Plantation, 20-4465625 Not Applicable \mathbf{FL} Country Country \$8.75 Additional 33322 5. Certificate of Status Desired 33322 USA USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ARTHUR, RICHARD J 9261 W. SUNRISE BLVD. Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33322 City Zip Code 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, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. O/D TITLE ☐ Delete TITLE ☐ Change ☐ Addition ARTHUR, RICHARD J NAME NAME STREET ADORESS 9261 W. SUNRISE BLVD. STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33322 CITY-ST-7IP TITLE ☐ Defete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS

12. I hereby certify that the information supplied with this filling closs 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 tub and courate 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 emportered 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 numerical statutes. I further certify that the information indicated in Chapter 119, Florida Statutes. I further certify that the information indicated in Chapter 119, Florida Statutes. I further certify that the information indicated in Chapter 119, Florida Statutes. I further certify that the information indicated in Chapter 119, Florida Statutes. I further certify that the information indicated in Chapter 119, Florida Statutes. I further certify that the information indicated in Chapter 119, Florida Statutes. I further certify that the information indicated in Chapter 119, Florida Statutes. I further certify that the information indicated in Chapter 119, Florida Statutes. I further certify that the information indicated in Chapter 119, Florida Statutes. I further certificate in Cha

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Richard J. Arthur

March 25, 2007 954474-3474

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