2008 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P06000067492 02-28-2008 90018 017 ***158.75 RICHARD E. DOUGLAS, P.A. Principal Place of Business Mailing Address 2771 EXECUTIVE PARK DRIVE 2771 EXECUTIVE PARK DRIVE SUITE 3 SUITE 3 WESTON, FL 33326 WESTON, FL 33326 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address. Suite, Apt. #, etc. Suite, Apt. #, etc. 02252008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 74-3177661 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DOUGLAS, RICHARD E Street Address (P.O. Box Number is Not Acceptable) 2771 EXECUTIVE PARK DRIVE SUITE 3 WESTON, FL 33320 33331 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. **PSTD** Change ☐ Addition TITLE ☐ Delete TITLE DOUGLAS, RICHARD E NAME MAME STREET ADDRESS 2771 EXECUTIVE PARK DRIVE, SUITE 3 STREET ADDRESS WESTON, FL 38326 3333 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Channe_ neilibba. Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE Delete THTLE NAME NAME STREET ADDRESS 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

Kichard E. Douglas

FILED Feb 28, 2008 8:00 am