2007 FOR PROFIT CORPORATION

FILED Apr 23, 2007 8:00 am Secretary of State

Country Zip Country S. Certificate of Status Desired \$8.75 Additions \$9.75 Additions \$9.	חטפויי							
A21 W CYPESSHEAD DR A27 W CYPESSHEAD DR A28 W CYPESSHEAD DR A38 W CYPESSHEAD DR	1. Entity Name INCENTOWIN CORPORATION						0254 019 ***150	0.00
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City & State Country S. Cardificate of Status Desired \$ 5. Cardificate of Sta	2. Principal Place of Business - No P.O. Box#		3. Mailing Address					
Time Part North	Suite, Apt. #, etc.		Suite, Apt. #, etc.		03032007	Chg-P	CR2E034 (12/06)	
S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MC COURT, CIARAN MC COURT, CIARAN MC COURT, CIARAN MC COURT, CIARAN PARKLAND, FL 33067 City FL Zip Code City FL Now, in the State of Florida. I am familiar with, and the obligations of registered/agent. SIGNATURE Signare, local or printed remre of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered/agent. SIGNATURE Signare, local or printed remre of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered/agent agent and the Audebable (Int) Explain Required Agent agent agent agent, or both, in the State of Florida. I am familiar with, and the obligations of registered/agent agent, or both, in the State of Florida. I am familiar with, and the obligations of registered/agent agent, or both, in the State of Florida. I am familiar with, and the obligations of registered/agent agent, or both, in the State of Florida. I am familiar with, and the obligations of registered/agent agent, or both, in the State of Florida. I am familiar with, and the obligations of registered/agent agent, or both, in the State of Florida. I am familiar with, and the obligations of registered/agent agent, or both, in the State of Florida. I am familiar with, and the obligations of registered/agent agent, or both, in the State of Florida. I am familiar with, and the obligations of registered/agent agent, or both, in the State of Florida. I am familiar with, and International agent agent, or both, in the State of Florida. I am familiar with, and International agent age	City & State		City & State					pplied For ot Applicable
Name Name Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Added to Fees City S.1-2P City S.1-	Zip	Country	Zip	Country	5. Certificate	of Status Desired		
Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable)		6. Name and Address of Current	Registered Agent		7. Name and	Address of New Ro	egistered Agent	
Street Address (P.O. Exx Number is Not Acceptable) City FL Zip Code				Name				
8. The above named entity activities 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 the obligations of registered agent. SIGNATURE S	7421 W CYPRESSHEAD DR			Street Addr	Street Address (P.O. Box Number is Not Acceptable)			
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN: TITLE PSTD MAKE MC COURT, MARGARET FILE NORESS CITY-ST-2P PARKLAND, FL 33067 TO Delete TITLE MAKE MC COURT, MARGARET FILE NORESS CITY-ST-2P FOR DELET ADDRESS TA21 W CYPRESSHEAD DR FOR DELET ADDRESS TITLE MAKE MAKE STREET ADDRESS CITY-ST-2P TITLE MAKE STREET ADDRESS S	n ia confar	ions of registered agent.	~ ·				/ a . A . A	
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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 traities 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 abother the empowered.

CHARLES

SIGNATURE: