2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 25, 2007 8:00 am Secretary of State

DOCUMENT # P06000157079 1. Entity Name MATCH EVENTS, INC.								05-25-2007 90027 046 ***150.00				
Principal Place of Business 322 E. MALLORY CIRCLE DELRAY BEACH, FL 33483 US				Mailing Address 322 E. MALLORY CIRCLE DELRAY BEACH, FL 33483 US				50001604				
2. Principal Place of Business - No P.O. Box #				3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.					05072007	Chg-P	CR2	E034 (12/06)	
City & State			City & State			<u>.</u>		4. FEI Number	35599	747		pplied For ot Applicable
Zip	p Country		Z	Zip		ountry		5. Certificate of	Status Desired		\$8.75 Ad	ditional
	6. Name	and Address of Current	Regist	ered Agent				7. Name and A	ddress of New !	Registere	d Agent	
JAFFEE, THOMAS A 322 E. MALLORY CIRCLE DELRAY BEACH, FL 33483						Name					-	
						Street Address (P.O. Box Number is Not Acceptable)						
						City				F	Zip Cod	ie
the obligat	tions of registe	submits this statement for ered agent.	or the po	urpose of changing its	register	ed office or re	egister	ed agent, or both	in the State of Fl	lorida. I ai	m familiar with,	and accept
SIGNATURE							required	when reinstating)		DATE		
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007 9. Election Campaign Final Trust Fund Contribution								00 May Be ed to Fees				
10. OFFICERS AND DIRECTORS 11.								ADDITIONS/C	HANGES TO OF	FICERS AI	ND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY+ST-ZIP	NAME JAFFEE, THOMAS A STREET ADDRESS 322 É, MALLORY CIRCLE			□ Delete		TLE AME Freet Address TY-ST-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP						LE ME BEET ADDRESS Y-ST-ZIP					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		. =			,	☐ Change	Addition
TITLE NAME STREET ADDRESS				☐ Delete	TITU NAM STRE						☐ Change	Addition

STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 changed, or on an attachment with an other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

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(SIGNATURE:

CITY - ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

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TITLE

NAME

OF SIGNING OFFICER OR DIRECTOR

Delete

☐ Delete

☐ Change

☐ Change

Addition

Addition

Match Events, Inc.

322 É. Mallory Circle Delray Beach, FL 33483 ATTACHMENT

May 1, 2007

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs:

Enclosed is a print-out of the online annual report for Match Events, Inc., and our check for \$150.00.

I tried to file online, but your site was not working and nobody picked up your help line after more than 90 minutes of waiting!

Please direct any questions to my attention at:

Tom Jaffee 322 E. Mallory Circle Delray Beach, FL 33483

Email: Tom@MatchEvents.com

Phone: (617) 290-7612

Sincerely,

Thomas A. Jaffee

President

Match Events, Inc.