2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 19, 2008 8:00 am Secretary of State

| DOCUMENT # P07000063391 1. Entity Name D'AGOSTINO REAL ESTATE GROUP, INC. | | | | | 05-19-2008 90040 035 ***150.00 | | | |
|---|--|--|----------------------------|-----------------------------|--------------------------------|------------------------|-----------------------------|---------------------------|
| Principal Place of Business 330 SOUTH PINAPPLE AVENUE, #102 SARASOTA, FL 34236 | | Mailing Address 330 SOUTH PINAPPLE AVENUE, #102 SARASOTA, FL 34236 | | - | | | | |
| 2. Principal Placerof Business - No P.O. Box # 3. Mailing Address 330 South | | | ineappe Quenu | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 04252008 | Chg-P | CR2E034 (12/06) | , |
| City & Stat | 507a +C | Scirasota, | FC | | 4. FEI Numb | <u>5</u> 27749 | 1 No | plied For t Applicable |
| 3 <u>4</u> 23 | Country SA | 359236 | Country | | | of Status Desired | \$8.75 Add | |
| | 6. Name and Address of Current F | Registered Agent | - Ange | | 7. Name and | Address of New R | egistered Agent | |
| MANGUS, JUDY 330 SOUTH PINAPPLE AVENUE, #102 SARASOTA, FL 34236 Street Address (P.O. Box Number is Not Acceptable) | | | | | | | | |
| OAIV.OO | City | | | | | | | |
| 8. The above name dentity 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 Signate, typed or printed name of registered agent and title it applicable. (NOTF: Registered Agent signature required when reinstating) A SIGNATURE Signature required when reinstating) | | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees | | | | | | | | |
| 10. | S OFFICERS AND I | | 11. | | ADDITIONS | CHANGES TO OFF | ICERS AND DIRECTORS | |
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| 12, I hereby | certify that the information supplied with | this filing does not qualify for | or the exemptions of | contained | in Chapter 119 | 9, Florida Statutes. I | further certify that the in | formation |

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 attaction with an address, with all other like empowered.

SIGNATURE: [[[]

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR