2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Mar 10, 2008 08:00 A Secretary of State **DOCUMENT # P92000008419** 1. Entity Name AIMEE BERNSTEIN & ASSOCIATES, INC. Principal Place of Business Mailing Address 5217 EAST LAKE DRIVE 5217 EAST LAKE DRIVE DEERFIELD BEACH, FL 33064 DEERFIELD BEACH, FL 33064 03052008 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0363335 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BERNSTEIN, AIMEE DO NOT WRITE 5217 EAST LAKE DRIVE DEERFIELD BEACH, FL 33064 IN THIS SPACE 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 Fiorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable DATE INOTE: Pagistared Apert signature (source) when (eigstating) \$5.00 May Be FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME BERNSTEIN, AIMEE U00000853226 03/26/08-80061-006 150.00 STREET ADDRESS 5217 EAST LAKE DRIVE CITY-ST-789 DEERFIELD BEACH, FL 33064 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP MILE NAME STREET ADDRESS

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR