2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: //

Feb 12, 2007 08:00 AM DOCUMENT # P93000010371 **Secretary of State** 1. Entity Name FRANKEL BROS. INC. Principal Place of Business Mailing Address 6503 CHASEWOOD DRIVE NORTH P.O. BOX 2717 JUPITER FL 33458 JUPITER FL 33468 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State 4. FEI Number City & State Applied For 65-0388707 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Dosired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo FRANKEL, RONALD 6503 CHASEWOOD DRIVE NORTH Street Address (P.O. Box Number is Not Acceptable) JUPITER FL 33458 City 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 the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 HHE Delete DILE ☐ Change ☐ Addition FRANKEL, RONALD G NAMI' NAME U00000633307 6503 CHASEWOOD DRIVE NORTH STREET ADDRESS 02/21/07-80057-018 150.00 STREET ADDRESS JUPITER FL 33458 CITY-ST-ZIP CHY-SI-7IP HILL ☐ Delete DILLE Change Addition FRANKEL, ARNOLD A NAME 9315 B. SOUTH EAST RANDALL COURT STREET ADDRESS STREET ADDRESS HOBE SOUND FL 33455 CITY-ST-ZIP CHY-ST-7IP THE ☐ Delete ☐ Change Addition NAMI NAM STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IMLE Delete THE ☐ Change ☐ Addition NAME SINECT ADDRESS STREET ADDRESS CITY-ST-702 CITY-ST-ZIP $\Pi\Pi E$ ☐ Change ☐ Delete MIL ☐ Addition NAMI. STREET ADDRESS STRLET ADDRESS CHY-SI-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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.

Ronald Frankel 2-8-07 561 745-2178

FILED