2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# P93000022538

Entity Name: BRAY INTERNATIONAL PROFESSIONAL SERVICES OF LONDON, INC.

Current Principal Place of Business:

402 APPELROUTH LANE
KEY WEST, FL 33040

New Principal Place of Business:

2432 FLAGLER AVENUE
KEY WEST, FL 33040

Current Mailing Address:

C/O MICHAEL L. BROWNING
402 APPELROUTH LANE
KEY WEST, FL 33040

New Mailing Address:

2432 FLAGLER AVENUE
KEY WEST, FL 33040

FEI Number: 65-0392634 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIS, GUY A
2432 FLAGLER AVENUE
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: BRAY, JOHN J
Address: 525 PETRONIA STREET
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: BRAY, ELIZABETH J
Address: 525 PETRONIA STREET
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: BROWNING, MICHAEL L
Address: 402 APPELROUTH LANE
City-St-Zip: KEY WEST, FL 33040

Title: D ( ) Delete
Name: BOEHM, ROBERT P
Address: 706 10TH ST.
City-St-Zip: MUKILTEO, WA 98275

Title: D ( ) Delete
Name: WILLIS, TONY
Address: 2432 FLAGLER AVE.
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL L. BROWNING D 04/28/2006

Electronic Signature of Signing Officer or Director — Date