2006 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: _

FILED Apr 12, 2006 08:00 AM Secretary of State

	<i>F</i>	ANNUAL R	REPORT	<i>_</i>	. 		or of Ctata
DOCUMENT # P93000048023 1. Entity Name SCOTT R. ROST, P.A.						Secret	ary of State
444 SEABRE STE 800	ce of Business EEZE BLVD EACH, FL 32118		dailing Address 444 SEABREEZE BLVD STE 800 DAYTONA BEACH, FL 32118	us		TALER HAN DRAW DRAW BRAW	
DO NOT WRITE IN THIS SPA				CE	01162005 No Chg-P CF2E034 (11/05) 4. FEI Number Applied For 59-3191509 Not Applied bis 5. Certificate of Status Desired \$8.75 Additional Fee Required		
ROST, SCOTT R 444 SEABREEZE BLVD STE 800 DAYTONA BEACH, FL 32118 8. The above named entity submits this statement for the purpose of changing its registers				DO NOT WRITE IN THIS SPACE ed office or registered agent, or both, in the State of Florida. 1 am familiar with, and accept			
				Agent signature required when reinstating) CATE			
FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.				*	00 May Be ed to Fees	<u> </u>	
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST ROST, SCOTT R 444 SEABREEZE DAYTONA BEAC	BLVD STE 800	CTORS			U000 04/26/0	00504433 6-80071-022 150.0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		DO NOT WRITE IN THIS SPACE					
CITY-S7-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE							

12. I hereby certify that the information supplied with this fitting 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 earne legal effect as if made under path; 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 effect this report as required by Chapter 607.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR