2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 08, 2006
Secretary of State

DOCUMENT# P93000081575

Entity Name: RAIL EVENTS, INC.

Current Principal Place of Business:

1390 SOUTH DIXIE HIGHWAY
SUITE 1203
CORAL GABLES, FL 33146 US

New Principal Place of Business:

Current Mailing Address:

1390 SOUTH DIXIE HIGHWAY
SUITE 1203
CORAL GABLES, FL 33146 US

New Mailing Address:

FEI Number: 65-0480292 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLLE, DENNIS J ESQ
2525 PONCE DE LEON BOULEVARD
SUITE 400
CORAL GABLES, FL 33134 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

OFFICERS AND DIRECTORS:

Title: DCEO ( ) Delete
Name: HARPER, ALLEN C
Address: 1390 SOUTH DIXIE HIGHWAY #1203
City-St-Zip: CORAL GABLES, FL 33146

Title: VPSD ( ) Delete
Name: HARPER, CAROL E.
Address: 1390 SOUTH DIXIE HIGHWAY #1203
City-St-Zip: CORAL GABLES, FL 33146

Title: DP ( ) Delete
Name: JACKSON, JEFFREY
Address: 1390 SOUTH DIXIE HIGHWAY #1203
City-St-Zip: CORAL GABLES, FL 33146

Title: T ( ) Delete
Name: MURPHY, LORETTA A CFO
Address: 1390 SOUTH DIXIE HIGHWAY #1203
City-St-Zip: CORAL GABLES, FL 33146

Title: VP ( ) Delete
Name: SCHRANCK, PAUL
Address: 479 MAIN AVENUE
City-St-Zip: DURANGO, CO 81301

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

Title: VP ( ) Change (X) Addition
Name: SCHLEGEL, JON
Address: 1390 S DIXIE HIGHWAY SUITE 1203
City-St-Zip: CORAL GABLES, FL 33146 US

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: LORETTA MURPHY T 11/08/2006

Electronic Signature of Signing Officer or Director — Date