


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000088193
 1. Entity Name
HIDDEN GROTTO INC.



Principal Place of Business Mailing Address
2424 SANTA BARBARA BLVD. **2424 SANTA BARBARA BLVD.**
CAPE CORAL, FL 33914-4454 US **CAPE CORAL, FL 33914-4454 US**

DO NOT WRITE IN THIS SPACE



04182006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
65-0459799 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CRUMP, KATHERINE
3312 SW 17TH PL
CAPE CORAL, FL 33914

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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 _____ DATE _____
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
After May 1, 2006 Fee will be \$330.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRUMP, KATHERINE 3312 SW 17TH PL CAPE CORAL, FL 33914
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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: Katherine Crump 4/18/06 239-772-4438
SIGNATURE AND TYPED OR PRINTED NAME OF SERVING OFFICER OR DIRECTOR Date Daytime Phone #