2006 FOR PROFIT CORPORATION

May 01, 2006 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P93000088683 1. Entity Name MFC PROPERTIES, INC. Principal Place of Business Mailing Address 7005 CENTRAL AVENUE 7005 CENTRAL AVENUE SAINT PETERSBURG, FL 33710 US SAINT PETERSBURG, FL 33710 US 04202006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3236790 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent DO NOT WRITE LOCKE, CHARLES 7005 CÉNTRAL AVENUE ST PETERSBURG, FL 33710 IN THIS SPACE 3. 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) OATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be U00000547870 Trust Fund Contribution. Added to Fees 05/12/06-80038-015 150.00 10. OFFICERS AND DIRECTORS TITO E CANNOVA, MICHAEL F STREET ADDRESS 980 TYRONE BLVD SAINT PETERSBURG, FL 33710 CITY-ST-7IP STREET ADDRESS E114-ST-219 MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling 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 it made under cath, 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

1133 F NAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS

FILED