2008 FOR PROFIT CORPORATION

Feb 28, 2008 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # P94000035775** TARTAN COLOR & CHEMICAL, INC. Principal Place of Business Mailing Address 2100 S TAMIAMI TRAIL 2100 S TAMIAMI TRAIL **STE 100** STE 100 SARASOTA, FL 34239-3803 US SARASOTA, FL 34239-3803 US No Chg-P CR2E034 (11/05) 02022008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0526518 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE CROY, LARRY E. 2100 SOUTH TAMIAM! TRAIL **STE 100** IN THIS SPACE SARASOTA, FL 34239 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable \$5.00 May Be 9. Election Campaign Financing U000Q0842793 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE HOUSTON, ROBERT W NAME STREET ADDRESS 5780 MIDNIGHT PASS RD., #408B CITY-ST-ZIP SARASOTA, FL TILLE CROY, LARRY E. NAME 2100 S. TAMIAMI TRL STE #100 STREET ADDRESS CiTY-ST-Z#P SARASOTA, FL TITLE DVP NAME HOUSTON, DAVID R 5780 MIDNIGHT PASS RD., #408B STREET ADDRESS DO NOT WRITE CITY-ST-ZIP SARASOTA, FL IN THIS SPACE TITLE NAME STREET ADORESS

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: KOBERT W HOUSTON

CITY-ST-ZIP TITLE NAME STREET ADDRESS CHTY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

941,955.4512

FILED