2006 FOR PROFIT CORPORATION

ANNUAL REPORT FILED Apr 27, 2006 08:00 AN Secretary of State DOCUMENT # P94000036641 SOUTH FLORIDA TROLLEY CO., INC. Principal Place of Business Mailing Address 998 S MILITARY TR 998 S MILITARY TR DEERFIELD BEACH, FL 33442 US DEERFIELD BEACH, FL 33442 US Partie of the president of the second colored by 01102006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2757155 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent PEREZ, JOSEPH SR DO NOT WRITE 5326 FLAMINGO COURT COCONUT CREEK, FL 33073 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstalling) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ۷ĩ TITLE NAME PEREZ, DARCY STREET ADDRESS 4500 NW 12TH DR. CITY-ST-7/P POMPANO BEACH, FL 33064 e de la companya de la co La companya de la co DP TITLE PEREZ, JOSEPH D MAME U00000539022 STREET ADDRESS 5326 FLAMINGO COURT 05/09/06-80083-023 150.00 COCONUT CREEK, FL 33073 CITY-ST-ZIP TI F er i de la competit de Capi NAME PEREZ, JOSEPH JR. STREET ADDRESS 4771 NW 13TH AVENUE DO NOT WRITE CITY-ST-ZIP POMPANO BEACH, FL 33064 TITLE IN THIS SPACE NAME STREET ADDRESS

12. I hereby 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 if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to exceed 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.

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