2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006
Secretary of State

DOCUMENT# P94000082897

Entity Name: BORO VENTURES, INC.

Current Principal Place of Business:

3209 SW PORT SAINT LUCIE BLVD.
#206
PORT SAINT LUCIE, FL 34953 US

New Principal Place of Business:

Current Mailing Address:

3209 SW PORT SAINT LUCIE BLVD.
#206
PORT SAINT LUCIE, FL 34953 US

New Mailing Address:

FEI Number: 65-0552173 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BORO, CLIFFORD T
4611 S UNIVERSITY DRIVE
#223
FORT LAUDERDALE, FL 33328 US

Name and Address of New Registered Agent:

BORO, CLIFFORD T
3209 SW PORT SAINT LUCIE BLVD
#206
PORT SAINT LUCIE, FL 34953 US

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: 04/05/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: BORO, CLIFFORD T
Address: 4611 S UNIVERSITY DR # 223
City-St-Zip: FORT LAUDERDALE, FL 33328 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: BORO, CLIFFORD T
Address: 3209 SW PORT SAINT LUCIE BLVD #206
City-St-Zip: PORT SAINT LUCIE, FL 34953 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: CLIFFORD T. BORO DPST 04/05/2006
Electronic Signature of Signing Officer or Director — Date