

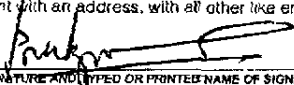


**2006 FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P95000007992</b>		
1. Entity Name <b>CENTRAL FLORIDA MANAGEMENT, INC.</b>		
Principal Place of Business <b>2523 US 27TH SOUTH #208 AVON PARK, FL 33825 US</b>		Mailing Address <b>2523 US 27TH SOUTH STE #208 AVON PARK, FL 33825 US</b>
<b>DO NOT WRITE IN THIS SPACE</b>		
		 03072006 No Chg-P CR2E034 (11/05)
4. FFI Number <b>65-0548581</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
6. Name and Address of Current Registered Agent <b>MCCOLLUM &amp; JOHNSON, P.A. 129 SOUTH COMMERCE AVE. SEBRING, FL 33870</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
<b>10. OFFICERS AND DIRECTORS</b>		<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>SEETHARAMIAH, PRAKASH 2523 US 27TH SOUTH #208 AVON PARK, FL</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>SEETHARAMIAH, INDRANI 2523 US 27TH SOUTH #208 AVON PARK, FL</b>	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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:  <b>PRAKASH SEETHARAMIAH</b> 03/09/06 (888) 452-0546		Date Daytime Phone #