2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # P95000023333 May 02, 2006 08:00 AN Secretary of State 1. Entity Name FENWICK INTERNATIONAL, INC. Principal Place of Business Mailing Address 4720 WEST CYPRESS ST. 4720 WEST CYPRESS ST. TAMPA, FL 33607 TAMPA, FL 33607 04282006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3323336 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PARKER, JEFFREY R DO NOT WRITE 4720 W. CYPRESS ST 1ST FL TAMPA, FL 33607 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 reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE PARKER, JEFFREY R NAME 4720 WEST CYPRESS ST. STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33607** U00000558836 05/17/06-80112-025 150.00 THE RILEY, SCOTT NAME STREET ADDRESS 4720 WEST CYPRESS ST. CITY-ST-7IP TAMPA, FL 33607 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/38/06 8/3-J87-J236
Date Dayline Phone #