2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 28, 2006 08:00 AM DOCUMENT # P95000047568 Secretary of State 1. Entity Name DATA SYSTEMS AND STORAGE, INC. Principal Place of Business Mailing Address 91 NE 1216TH STREET P 0 B0X 2538 CROSS CITY, FL 32628 US CROSS CITY, FL 32628 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01202008 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 59-3323256 Not Applicat. Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HODGES, RAYMOND H Street Address (P.O. Box Number is Not Acceptable) 91 NE 128TH STREET CROSS CITY, FL 32628 City Zip Code 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 it applicable. (NOTE: Registered Agent signature required when reinstating) DATE Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ח Delete TITLE TITLE Change Addition NAME HODGES, RAYMOND H JR. NAME STREET ADDRESS 91 NE 126TH STREET STREET ADDRESS CITY-ST-ZIP CROSS CITY, FL 32628 CITY - ST-208 TITLE Defete MLE Change ☐ Addition U000001450771 NAME MANE 03/10/06-80019-014 150.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete सर्व ह ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BILE Delete TITLE Change Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE ☐ Detete TITLE Addition 🔲 Change NAME NAME STREET ADDRESS STREET ADDRESS C37Y-ST-21P

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.

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Raymond H. Houge J- 2/24/05

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