2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Aug 18, 2005 8:00 am Secretary of State DOCUMENT # P96000019814 1. Entity Name 07-25-2005 90097 039 ***150.00 BEST LITTLE SUN BEATERS, INC. Principal Place of Business Mailing Address 3775 FOWLER STREET FORT MYERS FL 33901 3775 FOWLER STREET FORT MYERS FL 33901 2. Principal Place of Business 3. Mailing Address Suite, Apt. # etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 65-0651798 Not Applicable Ζip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHANDLER, JEFFREY T Street Address (P.O. Box Number is Not Acceptable) 218 SW 31ST STREET CAPE CORAL FL 33914 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 (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150,00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 HILE ☐ Delete MILE Addition Change CHANDLER, JEFFREY T NAME NALES STREET ADDRESS 218 SW 31ST STREET STREET ADDRESS CAPE CORAL FL 33914 CITY-ST-7/2 CITY-ST-ZP URE ☐ De!ata Dir ☐ Change Addition CHANDLER, ALISON A NAME SURFET ADDRESS 218 SW 31ST STREET STREET ADDRESS CAPE CORAL FL 33914 CITY-SI-ZIP CITY-51-7/2 IIILE ☐ Delete TITLE ☐ Change ☐ Addition NAME MALKE STREET ADDRESS STREET ABORESS C11Y-S1-21P CITY-ST-7P TITLE ☐ Delete TITLE ☐ Change ☐ Addition HAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP TITLE Delete TUD E ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IINE Delete THILE ☐ Change ☐ Addition NAME NAME

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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.

CITY-ST-ZIP

STREET ADDRESS

DΩ CICKIATURE

STPEET ADDRESS

CITY-ST-7/P

ATTACHNENT

Division of Corporations 196000019814

P. O. Box 1500 (26025939

Tallahassee, Fl. 32302-1500

August 15, 2005

To whom it may concern,

I never received the annual report notice for Sun Beaters. So if you could please waiver the late fee of 400.00 it would be greatly appreciated.

Jeff Chandler

Jeff Chandle

owner of Sun Beaters