2007 FOR PROFIT CORPORATION

Jan 18, 2007 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P96000035473** 01-18-2007 90113 047 ***150.00 1. Entity Name EAST 2 WEST, INC. PUUURVI Principal Place of Business Mailing Address 15325 N MAIN STREET /5/53 N. Main \$+. 15153 NORTH MAIN ST JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218 01032007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3382149 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TOMASSETTI, A. JEFFREY DO NOT WRITE **406 ASH STREET** FERNANDINA BEACH, FL 32034 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, typed or printed name of registered agent and title if applicable. DATE (NOTE, Registered Agent signature required when reinstating)

9. Election Campaign Financing

\$5.00 May Be

| After May 1, 2007 Fee will be \$550.00 | | | | |
|---|------------------------|--|------|------------|
| 10. OFFICERS AND DIRECTORS | | | | |
| TITLE | VP | | | |
| NAME | MAXWELL, ANGIE D | | | |
| STREET ADDRESS | 15153 NORTH MAIN ST | | | |
| CITY-ST-ZIP | JACKSONVILLE, FL 32218 | | | |
| TITLE | P.71 | | | |
| NAME | MAXWELL, KEVIN S | | ł | |
| STREET ADDRESS | 15153 NORTH MAIN ST | | | |
| CITY-ST-ZIP | JACKSONVILLE, FL 32218 | | | |
| TITLE | | | | |
| NAME | | | Į. | |
| STREET ADDRESS | | | l no | NOT WRITE |
| CITY-ST-ZIP | | | 1 50 | NOT WITH |
| TITLE | | | l in | THIS SPACE |
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| TITLE | | | | |
| NAME | | | | |
| STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | | |
| 12. Thereby 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 visitee 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:

FILE NOW!!! FEE IS \$150.00

FILED

Applied For

Not Applicable