2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 24, 2008 08:00 AI **DOCUMENT # P96000054030** Secretary of State 1. Entity Name MARK W. BRANDEL, INC. Principal Place of Business Mailing Address 2525 NE 131ST LANE 2525 NE 131ST LANE OKEECHOBEE, FL 34972 OKEECHOBEE, FL 34972 01152008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0680827 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRANDEL, MARK W DO NOT WRITE 2525 NE 131ST LANE OKEECHOBEE, FL 34972 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. Efection 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 OFFICERS AND DIRECTORS 10. TITLE NAME BRANDEL, MARK W U00000794984 01/28/08-80029-021 150.00 STREET ADDRESS 2525 NE 131 LN CITY-ST-7IP OKEECHOBEE, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 eport as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 in the corporation of the receiver or trustee empowered to execute this eport as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 in the corporation of the receiver or trustee empowered to execute this eport as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 in the corporation of the receiver or trustee empowered to execute this end to the corporation of the receiver or trustee empowered to execute the corporation of the receiver or trustee empowered to execute this end to the corporation of the receiver or trustee empowered to execute this execute the corporation of the receiver or trustee empowered to execute the corporation of the receiver or trustee empowered to execute the corporation of the receiver or trustee empowered to execute the corporation of the receiver or trustee empower end to execute the corporation of the receiver or trustee empower end to execute the corporation of the receiver or trustee end to execute the corporation of the receiver or trustee end to execute the corporation of the receiver of the receiver of the corporation of the receiver of the re

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR