2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000097919

Entity Name: ADDICO INC.

FILED Jun 19, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

ADDICO, INC. 500 PRIVATEER RD. NORTH PALM BEACH, FL 33408

Current Mailing Address: New Mailing Address:

ADDICO, INC. 500 PRIVATEER RD. NORTH PALM BEACH, FL 33408

FEI Number: 65-0714989 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FOLEY, MICHAEL
8316 BOB-O-LINK
500 PRIVATEER RD

WEST PALM BEACH, FL 33412 US NORTH PALM BEACH, FL 33408 US

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.

SIGNATURE: MICHAEL FOLEY 06/19/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: FOLEY, MICHAEL Name: FOLEY, MICHAEL

 Name:
 FOLEY, MICHAEL
 Name:
 FOLEY, MICHAEL

 Address:
 8316 BOB-O-LINK
 Address:
 500 PRIVATEER RD

 City-St-Zip:
 W. PALM BEACH, FL
 33408

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 FOLEY, ED
 Name:
 FOLEY, ED

 Address:
 8316 BOB-O-LINK
 Address:
 8210 SPYGLASS

 City-St-Zip:
 W. PALM BEACH, FL
 City-St-Zip:
 W. PALM BEACH, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL FOLEY PD 06/19/2006