2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 27, 2006 08:00 AM Secretary of State DOCUMENT # P96000099987 BERKLEY DEVELOPMENT CORPORATION Principal Place of Business Mailing Address 3625 DEL PRADO BLVO. 3625 DEL PRADO BLVD. CAPE CORAL FL 33904 CAPE CORAL FL 33904 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State Applied For City & State 4. FEI Number 65-0712398 Not Applicab! Zip Country Zip 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 GERRERO, ROBERT D Street Address (P.O. Box Number is Not Acceptable) 3625 DEL PRADO BLVD. CAPE CORAL FL 33904 Zip Code City 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 primod name of registered agent and title it explicable DATE (NOTE: Registered Agent signature required when re-natating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May 8e After May 1, 2006 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete Addition TITLE Change NAME GERRERO, HENRY NAME STREET ADDRESS 3625 DEL PRADO BLVD. STREET ADDRESS 11.000448152 DITY-S1-ZIP CAPE CORAL FL 33904 City-SI-78 03/199/06 80002-013 1**58.7**5 3371 F ☐ Delete सास ☐ Change Addition NAME GERRERO, ROBERT NAME STREET ADDRESS STREET ADDRESS 3625 DEL PRADO BLVD. CITY-ST-ZIP CAPE CORAL FL 33904 CITY-ST-ZIP TITLE Delete TITLE ☐ Change 🔲 Addition NAME NAME STREET ADDRESS STREET ADDRESS CRY-ST-ZIP CITY-ST-ZIP 7172 F ☐ Delete 7173 F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZP CITY-ST-ZIP IIILE ☐ Defete Change ☐ Addition NAME MARKE STREET ADDRESS STREET ADDRESS CITY-S1-21P CITY-ST-ZIP DILE ☐ Defete THILE ☐ Change ☐ Addition MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CMY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 it made under oath; that I am an officer or director of the corporation or the receiver or thistee 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 effectivent with an address, with all other like empowered.

FILED

Henry Gerrero Pres 2/24/06 2395403600