2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000008978

FILED Feb 23, 2006 Secretary of State

| Entity Nar | me: TRACY'S | FLORIS | ST, INC. | | | |
|---|---|----------|------------------------|---|---|--|
| Current Principal Place of Business: | | | | New Principal Place | New Principal Place of Business: | |
| | LANTIC BLVD D BEACH, FL 3 | 33060 | US | | | |
| Current Mailing Address: | | | | New Mailing Address | New Mailing Address: | |
| | LANTIC BLVD D BEACH, FL 3 | 33060 | US | | | |
| FEI Number: | 65-0722977 | FEI Nu | mber Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address o | Name and Address of New Registered Agent: | |
| PIERCE, CLIFFORD Y CPA 290 NW 165 STREET M100 MIAMI, FL 33169 US | | | | | BUSHING, MIKE 1430 E ATLANTIC BLVD POMPANO BEACH, FL 33060 US | |
| | named entity s e of Florida. | ubmits | this statement for the | purpose of changing its registered | d office or registered agent, or both, | |
| SIGNATURE: MIKE BUSHING | | | | | 02/23/2006 | |
| | Electron | ic Signa | ture of Registered Ag | gent | Date | |
| Election Can | npaign Financing | Trust F | und Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | D () BUSHING, TRAC 1430 E ATLANT POMPANO BEA | IC BLVD | 33060 US | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | D () BUSHING, MICH 1430 E ATLANT | IC BLVD | 2060 | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: MIKE BUSHING D 02/23/2006