2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 31, 2007 08:00 AM **DOCUMENT # P97000025808 Secretary of State** POLVERARI, INC. Principal Place of Business Mailing Address 2141 BLOUNT RD 2141 BLOUNT RD POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 CR2E034 (11/05) 01082007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0738459 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent POLVERARI, GLEN W DO NOT WRITE 2141 BLOUNT ROAD POMPANO BEACH, FL 33069 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. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE POLVERARI, GLEN NAME 2141 BLOUNT RD STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33069 U00000614084 02/06/07-80011-023 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 tustee ampowered 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 putty an applicacy with all other like empowered.

SIGNATURE

NAME STREET ADDRESS CITY-ST-7IP