2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000051027

FILED Nov 07, 2007 Secretary of State

Entity Name: EXACT BUILDERS INCORPORATED Current Principal Place of Business: New Principal Place of Business: 215 W. VERNE STREET SUITE A TAMPA, FL 336062320 US **New Mailing Address: Current Mailing Address:** 215 W. VERNE STREET SUITE A TAMPA, FL 336062320 US FEI Number: 59-3453479 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: LEONE, DENNIS D 215 W. VERNE STREET, SUITE A TAMPA, FL 336062320 ÚS 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition LEONE, JASON LEONE, DENNIS Name: Name: 14510 POND CYPRESS WAY 215 W. VERNE STREET, SUITE A Address: Address: TAMPA, FL 33606 US City-St-Zip: TAMPA, FL 33626 US City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: GLASS, STEPHEN T Name: LEONE, JASON 1315 DEERBOURNE DRIVE 215 W. VERNE STREET, STE. A Address: Address: WESLEY CHAPEL, FL 33543 US TAMPA, FL 33606 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition GLASS, STEPHEN T Name: Name: 1315 DEERBOURNE DRIVE Address Address: City-St-Zip: City-St-Zip: WESLEY CHAPEL, FL 33543 Title: () Delete Title: () Change (X) Addition ROACH, FRED Name: Name: Address: Address: 215 W. VERNE STREET, STE. A City-St-Zip: City-St-Zip: TAMPA, FL 33606 Title: Title: () Change (X) Addition () Delete SHANKMAN, DAVID S Name: Name: Address: Address: 215 W. VERNE STREET, STE, A City-St-Zip: City-St-Zip: TAMPA, FL 33606

I hereby certify that the information supplied with this filing does not qualify 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: DENNIS LEONE Ρ 11/07/2007