2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 16, 2006 08:00 AM **Secretary of State** DOCUMENT # P97000057179 1. Entity Name TREND SETTERS, INC. Mailing Address Principal Place of Business 514 SOUTHWEST SECOND AVENUE 514 SOUTHWEST SECOND AVENUE OCALA, FL 34474 OCALA, FL 34474 CR2E034 (11/05) 02262006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3458505 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent HOOD, TERRELL 514 SOUTHWEST SECOND AVENUE DO NOT WRITE OCALA, FL 34474 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. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 02/28/06-80037-004 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME HOOD, TERREL STREET ADDRESS 514 SOUTHWEST SECOND AVENUE CATY-ST-ZIP OCALA, FL 34474 ת תת HOOD, KIM NAME 7450 NW 83RD CT. RD. STREET ADDRESS CITY-ST-ZIP OCALA, FL 34474 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this titing 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NO OFFICER OR DIRECTOR

FILED