2006 FOR PROFIT CORPORATION

FILED Apr 28 2006 08:00 AM

| ANNUAL REPORT | | | Secretary of State | |
|---|---|----------------------------------|---|---|
| DOCUMENT # P9700006 1. Entity Name CCI OF JENSEN BEACH, INC. | 5299 | | | any or searc |
| Principal Place of Business 3201 NW FEDERAL HWY JENSEN BEACH, FL 34957 US | Mailing Address 1371 PALMETTO PARK ROAD BOCA RATON, FL 33486 US | | 1 (22012) 40 (20) (22) 220 (23) (24) | X 18XX 0XXI 0XX 1XX 1XX 1XX 1XX 1XX 1XX 1XX 1XX 1XX |
| DO NOT WRITE | | E | 04262006 No Chg-P 4. FEI Number 65-0774203 5. Certificate of Status Desired | CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required |
| SIEGEL, NAT 1371 PALMETTO PARK ROAD BOCA RATON, FL 33486 | - | | DO NOT W IN THIS SP | |
| 8. The above named entity submits this statement if the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent. FILE NOWILL FEE IS \$150.00 | s and title if applicable. (NOTE Registers of A | Agent signature required ing\$5. | | orida. I am familiar with, and accept |
| After May 1, 2006 Fee will be \$550 | | | 4 10 1 003 | |
| TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP | | | U00000 05/10/06- | 1542809 -80117-010 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | | DO NOT W IN THIS SE | |
| CITY-SI-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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

4-26-06 Date

501-362-5514 Daytime Prone #