2006 FOR PROFIT CORPORATION ANNUAL REPORT

STATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 27, 2006 08:00 AM Secretary of State

4-24-06 727-442-1

| 1. Entity Nam | MENT # P9700010790 SEARCH ENTERPRISES INC. | 9 | | | Scerce | ary or state |
|---|---|--|-----------------------------|--------------------------|----------------------|---|
| | TRY WOODS LANE | alling Address 1870 COUNTRY WOODS LANE PALM HARBOR, FL 34683 | | | | |
| D | O NOT WRITE II | | CE | | No Chg-P | CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required |
| | | DO NOT WRITE 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 lamillar with, and accept the obligations of registered agent. | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent and rife | Il applicable INOTE Registere | ed Agent signature required | s when reinstalling) | | DATE |
| FIL After Ma | E NOW!!! FEE IS \$150.00 sy 1, 2006 Fee will be \$550.00 | Election Campaign Final Trust Fund Contribution. | | .00 May Be ed to Fees | | |
| TIRLE NAME STREET ADDRESS CITY-ST-ZUP STILE NAME STREET ADDRESS CITY-ST-ZUP | OFFICERS AND DIRECT D PISANI, JAMES 2870 COUNTRY WOODS LANE PALM HARBOR, FL 34683 | ofors | | (| unnnnn 15/08/06-i | 80115-054 120°00 230331 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | OT WI | |
| TITLE NAME STREET ADDRESS CHY-ST-ZIP THE HAME STREET ADDRESS CHY-ST-ZIP | | | | | | |
| 12. I hereby certify that the information supplied with this filling 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: | | | | | | |