2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 23, 2007 08:00 AM Secretary of State **DOCUMENT # P98000006691** JOSEPH P. WAGONER, P.A. Mailing Address Principal Place of Business 721 NE 3RD AVE **721 NE 3RD AVE** FORT LAUDERDALE, FL 33304 FORT LAUDERDALE, FL 33304 CR2E034 (11/05) 04182007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0810816 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WAGONER, JOSEPH P DO NOT WRITE 721 NE 3RD AVE FORT LAUDERDALE, FL 33304 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) 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 WAGONER, JOSEPH P STREET ADDRESS 721 NE 3RD AVE CITY-ST-ZIP FORT LAUDERDALE, FL 33304 U00000722595 TITLE 05/02/07-80037-022 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE 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 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

Joseph?. Wagoner 4-18-07

FILED