2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000032488

Entity Name: PRO POSITIVE, INC.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3980 TAMPA RD, STE 205 23110 SR 54, SUITE 214 OLDSMAR, FL 34677 LUTZ, FL 33549

Current Mailing Address: New Mailing Address:

23110 SR 54, SUITE 214 3980 TAMPA RD, STE 205 LUTZ, FL 33549 OLDSMAR, FL 34677

FEI Number: 59-3511861 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:

SNIFFEN, ROBERT J MOYLE, FLANIGAN, KATZ, KOLINS, & RAYMOND 210 S MONROE ST

211 EAST CALL STRÉET TALLAHASSEE, FL 32301 US TALLAHASSEE, FL 32301 US

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.

SNIFFEN, ROBERT J

ROBERT J. SNIFFEN, ATTORNEY AT LAW

SIGNATURE: ROBERT J. SNIFFEN 05/01/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title:

LEWIS, GARY B Name: Name: LEWIS, GARY B 11266 W HILLSBOROUGH AVE #212 Address: 23110 SR 54, SUITE 214 Address:

City-St-Zip: TAMPA, FL 33635 City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: GARY B. LEWIS PD 05/01/2006