## 2007 FOR PROFIT CORPORATION, ANNUAL REPORT

## Apr 25, 2007 08:00 A Secretary of State DOCUMENT # P98000049663 1. Entity Name COTOGO II CORP. Principal Place of Business Mailing Address 11380 PROSPERITY FARMS RD., #104 11380 PROSPERITY FARMS RD., #104 PALM BEACH GARDENS, FL 33410 PALM BEACH GARDENS, FL 33410 02112007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0844844 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COREY, MICHAEL T DO NOT WRITE 11380 PROSPERITY FARMS RD., #104 PALM BEACH GARDENS, FL 33410 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 signatura required when remetating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE NAME COREY, MICHAEL T 11380 PROSPERITY FARMS RD., #104 STREET MYORESS CTTY-ST-ZIP PALM BEACH GARDENS, FL 33410 MLE 000000730613 05/08/07-80087-018 150.00 TORNABEN, PETER J NAME STREET ADDRESS 11380 PROSPERITY FARMS RD., #104 PALM BEACH GARDENS, FL 33410 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TTDE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment yith an address, with all other like empowered. SIGNATURE:

FILED