FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90307 041 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

50019484

DOCUMENT # P98000067496

1. Entity Name
SHOT GUN EAST, INC.

Principal Place of Business	Mailing Address
1000 NORTH HIATUS ROAD SUITE 100 PEMBROKE PINES, FL 33026	1000 NORTH HIATUS ROAD SUITE 100 PEMBROKE PINES, FL 33026

04172006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
400 N. PINE ISLAND RD	400 N. PINE ISALND RD
Suite, Apt. #, etc. 300	Suite, Apt. #, etc. 300
City & State: PLANTATION, FL	City & State: PLANTATION, FL
Zip: 33324 Country: U.S.A	Zip: 33324 Country: U.S.A

4. FEI Number: 65-0855353 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
E.H.G. RESIDENT AGENTS, INC. 5100 TOWN CENTER CIRCLE SUIT430 BOCA RATON, FL 33486	Name Street Address (P.O. Box Number is Not Acceptable) City Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP MILLER, ROBERT B 1000 NORTH HIATUS ROAD, STE 100 PEMBROKE PINES, FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP MILLER, ROBERT B 400 N. PINE ISALND RD SUITE 300 PLANTATION, FL 33324	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP MILLER, LEONARD 1000 NORTH HIATUS ROAD,STE 100 PEMBROKE PINES, FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP MILLER, LEONARD 400 N.PINE ISLAND RD SUITE 300 PLANTATION, FL 33324	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BERGER, ADOLPH 1000 NORTH HIATUS ROAD STE. 100 PEMBROKE PINES, FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BERGER, ADOLPH 400 N. PINE ISLAND RD SUITE 300 PLANTATION, FL 33324	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP BERGER, HELENE 1000 NORTH HIATUS ROAD STE. 100 PEMBROKE PINES, FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP BERGER, HELENE 400 N. PINE ISLAND RD SUITE 300 PLANTATION, FL 33324	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPS COTT, CORINNE M 1000 NORTH HIATUS ROAD STE. 100 PEMBROKE PINES, FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPS COTT, CORINNE M 400 N. PINE ISLAND RD SUITE 300 PLANTATION, FL 33324	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPT COTT, LAWRENCE J 1000 NORTH HIATUS ROAD STE. 100 PEMBROKE PINES, FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPT COTT, LAWRENCE J 400 N. PINE ISLAND RD SUITE 300 PLANTATION, FL 33324	☒ Change ☐ Addition

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: Corinne M Cott 4/26/06 954431-6100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CORINNE COTT, VICE PRESIDENT