2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000105765 **Secretary of State** , N & N CORP. OF 1400 ROYAL PALM BEACH BOULEVARD Principal Place of Business Malling Address 205 1/2 SMITH ST STE 106 PO BOX 1801 WEST PALM BEACH, FL 33401 DADE CITY, FL 33526 02092006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0312251 Not Applicat! \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOGSDON, JOHN M DO NOT WRITE 2600 N FLAGLER DRIVE, SUITE 1012 WEST PALM BEACH, FL 33407 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, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when seinstaling) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 **\$5.00** May Be П Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS THE n NAME LOGSDON, JOHN M 200 MOCKINGBIRD TRAIL STREET ADDRESS CITY-SI-ZIP PALM BEACH, FL 33480 THE NICOLINI, PATRICK F NAME U00000435619 02/25/06-80049-809 150.00 STREET ACCORESS P O BOX 1801 N/A CITY-SI-ZIP DADE CITY, FL 33526 TITLE NICOLINI, DONALD N NAME STREET ADDRESS 1167 HILLSBORO MILE#305 DO NOT WRITE CHY-ST-ZIP POMPANO BEACH, FL 33062 HTLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP HILE STREET ADDRESS

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 eath; 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 the empowered.

ALK NICOLIZA

SIGNATURE:

CHY-ST-ZIP

HILE
NAME
STREEL ADDRESS
CHY-ST-ZIP

2/9/06 813 390091

FILED

Feb 15, 2006 08:00 AM