2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 24, 2006 08:00 AN Secretary of State **DOCUMENT # P99000006630** DEFCON-4 PAINTBALL SUPPLY, INC. Mailing Address Principal Place of Business 104 NORTH THOMAS STREET **104 NORTH THOMAS STREET** PLANT CITY, FL 33563 PLANT CITY, FL 33563 04122006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3554385 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE EVANS, STEPHEN L 104 NORTH THOMAS STREET PLANT CITY, FL 33563 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 fille if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE EVANS, STEPHEN L 104 NORTH THOMAS STREET STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33563 U00000526810 05/04/06-80087-024 150.00 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 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: 2

STREET ADDRESS CITY-ST-ZIP

DYM MAN

STEPHEN L. EVANS

4-21-06

813-752-1795

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Daytime Phone ≠