2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2006 8:00 am Secretary of State

| 1. Entity Name BLUE MARLIN FILTER, INC. | | | | | 04-27-2006 90185 038 ***150.00 | | | | |
|---|--|--|--|--|--------------------------------|--------------|--|-------------------------------------|--|
| Principal Plac | e of Business | Mailing Address | | 7 | | | | | |
| 118 S BARFI | IELD DR | 118 S BARFIELD DR | | | • | | | | |
| STE A MARCO ISLAND, FL 34145 MARCO ISLAND, FL 34145 | | 45 | | | | | | | |
| 2. Principal Place of Business 4. Mailing Address 4. N. Barte Suite, Apt. #, etc. Suite, Apt. #, etc. | | | field Da | | | | | | |
| | | Ste 16 | | 01172006 | Chg-P | CR2E03 | 4 (11/05) | | |
| Wity & Stat | to Island, FC | City & State Warco Ki | and the | 4. FEI Number 59-360 | | | | oplied For ot Applicable | |
| 3414 | Country | Zip 34145 | Country | 5. Certificate | of Status Desired | | 8.75 Add ee Require | litional d | |
| | 5. Name and Address-of Current | Registered Agent | | 7. Name and | Address of New I | Registered A | gent | | |
| QUINN, JEFFREY C | | | | Name | | | | | |
| 307 AIRPORT RD | | | Street Address | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| NAPLES, FL 34104 | | | | | | | | | |
| | | | City | | ***, | FL | Zip Cod | e | |
| 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 a | and the Vernileable AVATE | | | | | | | |
| <u> </u> | Signature, types or printed from the regional agents. | TO BOX I ADJUNCTION . (NO.1C.) | Registered Agent signature requi | red when rematating) | | DATE | | | |
| FIL After M | E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0 | 9. Election Campaig | n Financing\$ | 5.00 May Be | | DATE | | | |
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Rorida 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:

GREGORY A MANN VPRES 4 Detail