2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 25, 2008 08:00 AN Secretary of State DOCUMENT # P99000095152 1. Entity Name MASTERSCAPE, INC. Principal Place of Business Mailing Address 591 SAND WEDGE LOOP 591 SAND WEDGE LOOP APOPKA, FL 32712 APOPKA, FL 32712 CR2E034 (11/05) 04242008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3606553 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WALKER, BERRY J JR. DO NOT WRITE 1053 MAITLAND CENTER COMMONS BLVD. #200 IN THIS SPACE MAITLAND, FL 32751 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 Berry J. Walker, Jr. the obligations of registered SIGNATURE (NOTE: Registered Agent signature required when reinstating 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE WILSON, CHRISTOPHER S NAME STREET ADDRESS 591 SAND WEDGE LOOP CITY-ST-7IP APOPKA, FL 32712 TITLE WILSON, LORRAINE D NAME STREET ADDRESS 591 SAND WEDGE LOOP CITY-ST-ZIP APOPKA, FL 32712 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

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 on 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 plike empowered.

Corraine D. Wilson

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP