2007 FOR PROFIT CORPORATION

Mar 22, 2007 08:00 A Secretary of State **ANNUAL REPORT DOCUMENT # P99000095928** 1. Entity Name TIMOTHY K. BARKET, P.A. Mailing Address Principal Place of Business 19 W FLAGLER #1212 19 W FLAGLER #1212 MIAMI, FL 33130 MIAMI, FL 33130 CR2E034 (11/05) No Chg-P 01082007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0958826 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BARKET, TIMOTHY K DO NOT WRITE 19 W FLAGLER #1212 MIAMI, FL 33130 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. Lam familiar with, and accept the obligations of registered agent. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE; Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. BARKET, TIMOHTY K NAME STREET ADDRESS 19 W FLAGLER #1212 CITY-ST-ZIP MIAMI, FL 33130 TITLE 000000675351 03/30/07-80015-016 150:00 NAME STREET ADDRESS CITY-ST-ZIP THEF NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE RUF NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the indicated on this report formation supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information suppliemental 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 decipies of truster amprovered to execute this export as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation of the i

SIGNATURE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED