€2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

May 03, 2006 08:00 AM Secretary of State DOCUMENT # S05452 1. Entity Name BFC, INC. Principal Place of Business Mailing Address 4011 N. FORBES ROAD 4011 N. FORBES ROAD PLANT CITY, FL 33565 PLANT CITY, FL 33565 01292006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3039716 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box 6. Name and Address of Current Registered Agent VASH, DALE W. DO NOT WRITE 501 EAST KENNEDY BLVD. TAMPA, FL 33602 IN THIS SPACE 5. 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. (NCTE: Registered Agent signature required when reinstalling) Stanature, typed or printed name of registered agent and title if applicable 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 PIERGALLINI, DANIEL E. NAME 4011 N. FORBES RD. STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL U00000559820 05/18/06-80013-019 150.00 TITLE SMITH, BRUCE G. MAME STREET ADDRESS 2507 BORDEAUX WAY CITY-ST-ZIP LUTZ, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-200 IN THIS SPACE 7171.F NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 receiveryor frushed 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.

THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED