2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S20732

OFFICIAL FUND

FILED May 01, 2007 Secretary of State

| Entity Nan | ne: SECONI | J MILE, INC. | | | |
|---|--|--|---|--|--|
| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
| 3709 S TAI ORLANDO | MPA AVE 9, FL 3283988 | 337 | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| 3709 S TAI ORLANDO | MPA AVE 9, FL 3283988 | 337 | 4628 CANARY ST ORLANDO, FL 32812 | | |
| FEI Number: | 59-3043774 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of New Registered Agent: | | |
| | MPA AVE , FL 32809 named entity | US submits this statement for the p | ourpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUR | RE: | | | | |
| | Electro | nic Signature of Registered Age | ent | Date | |
| | | 93(2)(b), F.S., the corporation did no g Trust Fund Contribution(). | ot receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | DPT (AUSTIN, KRIS 3709 S TAMP, ORLANDO, FL | A AVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | DVS (AUSTIN, CATH 3709 S TAMPA ORLANDO, FL | \ AVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRIS AUSTIN DPT 05/01/2007