2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # S28828

COLTON ENTERPRISES, INC.



FILED Apr 21, 2006 08:00 AM Secretary of State

Principal Place of Business

6013 FERRERA ST. JUPITER, FL 33458 US

Mailing Address

6013 FERRERA ST.

JUPITER FL 33458

US

03282006

No Chg-P

CR2E034 (11/05)

4. FEI Number | 65-0251427

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLTON, RONALD T 6013 FERRERA STREET JUPITER, FL 33458

SIGNATURE: 2

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| | | | | 124 1 | | O.L. |
|---|--|--|-------------------------------|---|---|--|
| 8. The above the obliga | named entity submits this statement for the patients of registered agent. | urpose of changing its registered off | ice or re | egistered agent, or both, | in the State of Florida. | I am familiar with, and accep |
| SIGNATURE. | Signature, typed or printed name of registered agent and little t | | | | [| |
| | Signature, typed or prinsed name of registered agent and little i | application (NOTE, Registered Agen) | signature | required when reinstalling) | | ATE |
| | E NOWILL FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00 | Election Campaign Financing Trust Fund Contribution. | | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIREC | TORS | | | | |
| TITLE MAME STREET ADDRESS CITY-ST-ZIP | PVPS COLTON, RONALD T 6013 FERRERA STREET JUPITER, FL 33458 | | | | U0000052 05/03/06-20 | 4460 1114-011 150.00 |
| TITLE MAME STREET ADDRESS CITY-ST-ZIP | | | | | : | - |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO I | OT WRI | TE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | IN T | HIS SPAC | E |
| TITLE MAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| 12. I hereby of indicated of the con- changed, | ertify that the information supplied with this fill on this report of supplemental report is true au Joratilon or the receiver of trustee empowered or on an attachment with an address, with all | ng does not qualify for the exemption of accurate and that my signature should be execute this report as required by other like empowered. | ns cont all have Chapte | ained in Chapter 119, Fi a the same legal effect as or 607, Florida Statutes; a | orida Statutes. I further a if made under oath; the and that my name appe | r certify that the information and I am an officer or director sars in Block 10 or Block 11 if |