2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 31, 2008 08:00 AN Secretary of State **DOCUMENT # S30151** 1. Entity Name SUMMER CORPORATION Principal Place of Business Mailing Address 5694 CRENSHAW ST 5694 CRENSHAW ST TAMPA, FL 33634 TAMPA, FL 33634 CR2E034 (11/05) 01092008 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3068911 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KUO, WEN TON DO NOT WRITE 5694 CRENSHAW ST TAMPA, FL 33634 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 Fiorida. I am familiar with, and accept the obligations of registered agent. (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 OFFICERS AND DIRECTORS 10. TITLE NAME KUO, WEN TON 5694 CRENSHAW STREET STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33634** U00000805837 02/05/08-80018-004 150.00 NAME STREET ADDRESS CITY-ST-ZIP TTTLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-21P TITLE NAME STREET ADDRESS

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 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO