2006 FOR PROFIT CORPORATION

Feb 17, 2006 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # S31150** LERÓY HOLDINGS CO. Principal Place of Business Mailing Address 1390 BRICKELL AVE 1390 BRICKELL AVE 280 280 MIAMI, FL 33131 MIAMI, FL 33131 No Chg-P 01262006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FE) Number 65-0242751 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent LEWIS, LYNN B. DO NOT WRITE 1390 BRICKELL AVE SUITE 280 IN THIS SPACE MIAMI, FL 33131 3. 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature regulated when reinstating) 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. П Added to Fees OFFICERS AND DIRECTORS 10. DTLE NAME LEWIS, LYNN B. 1390 BRICKELL AVE, SUITE 280 STREET ADDRESS CHTY-ST-ZIP MIAMI, FL 33131 TOTE MAME 000000437813 02/2<mark>8/0</mark>6-80063-007 **150.00** STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CHY-81-21P MICE NAME STREET ADDRESS C)17-S1-21P MALE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 champed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

34.0148

Date