2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 24, 2006 08:00 AN DOCUMENT # S62232 **Secretary of State** SKORMAN DEVELOPMENT CORP. Mailing Address Principal Place of Business 9720 LAKE ISLEWORTH CT 9720 LAKE ISLEWORTH CT WINDERMERE, FL 34786 US WINDERMERE, FL 34786 04182006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0274663 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SKORMAN, MARC DO NOT WRITE 9720 LAKE ISLEWORTH CT WINDERMERE, FL 34786 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 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. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE SKORMAN, MARC NAME STREET ADDRESS 9720 LAKE ISLEWORTH CT City-st-zip WINDERMERE, FL 34786 000000527227 05/04/06-80104-013 150.00 RTLE SKORMAN, KEVIN NAME STREET ADDRESS 9720 LAKE ISLEWORTH CT CITY-ST-ZIP WINDERMERE, FL 34786 7771 F MAME STREET ADDRESS. DO NOT WRITE CATY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE

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 eath; 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 changed, or on an attachment with an accuracy with all other like empowered.

NAME STREET ADDRESS CITY-ST-ZIP