2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 16, 2007 08:00 A Secretary of State DOCUMENT # P95000094562 1. Entity Name BRADLEY'S EXOTIC BIRDS, INC. Principal Place of Business Mailing Address 5600 W CR232 5600 W CR232 BELL, FL 32619 US BELL, FL 32619 US 04102007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3362606 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **BURT, THEODORE M** DO NOT WRITE 114 NE FIRST ST TRENTON, FL 32693 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) FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME BRADLEY, LAVERN L STREET ADDRESS 5600 W/ CR 232 CITY-ST-ZIP BELL, FL 32619 TITLE BRADLEY, CAROL A NAME STREET ADDRESS 5600 W CR 232 CITY-ST-ZIP **BELL, FL 32619** TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE THIE NAME STREET ADDRESS CITY-ST-ZIP TITLE U00000710773 04/25/07-80055-025 150.00 NAME STREET ADDRESS CITY-ST-ZiP 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

GRATURE AND TYPED OR PRINTED NAME OF EIGHING OFFICER OR DIRECTOR

04-12-07 352-463-1352

FILED

Carol A. Bradley