

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90041 046 ***150.00

DOCUMENT # 286994	
1. Entity Name 2542 CORPORATION	

Principal Place of Business 2542 CORPORATION BOYNTON BEACH FL 33435 US	Mailing Address 2542 SO FEDERAL HWY BOYNTON BEACH FL 33435 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/06)


4. FEI Number 28-6994600	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SABLON, JOSEPH 2542 S FEDERAL HWY APT 15 BOYNTON BEACH FL 33435	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 	4/8/07 DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SABLON, JOSEPH 2542 SOUTH FEDERAL HWY APT 15 BOYNTON BEACH FL 33435 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V NICHOLSON, EDWARD 2542 SOUTH FEDERAL HWY APT 10 BOYNTON BEACH FL 33435 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MARCUS, AWILDA 2542 SOUTH FEDERAL HWY APT 9 BOYNTON BEACH FL 33435 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T/S MARCUS, AWILOA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2542 So FEDERAL Hwy #9 BOYNTON BEACH FL 33435
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HINSON, CECIL 2542 SOUTH FEDERAL HWY APT 12 BOYNTON BEACH FL 33435 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JOE BARBERIO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2542 So FEDERAL Hwy #19 BOYNTON BEACH FL 33435
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PAULSEN, ALBERT 2542 SOUTH FEDERAL HWY APT 6 BOYNTON BEACH FL 33435 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SIEVERT, VERA 2542 SOUTH FEDERAL HWY APT 18 BOYNTON BEACH FL 33435 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: 	JOSEPH F. SABLON	4/8/07
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ATTACHMENT
40060879
#286994

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DICKERSON, ANN
2542 So FEDERAL Hwy #11
BOYNTON BEACH FL 33435

2542 Corp
2542 So FEDERAL Hwy
BOYNTON BEACH FL 33435

FEI # 28-6994600