


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2005 08:00 AM
Secretary of State

DOCUMENT # 343899
1. Entity Name
7200 CORP



Principal Place of Business
2775 W. OKEECHOBEE RD.
HIALEAH, FL 33010

Mailing Address
2775 W. OKEECHOBEE RD.
HIALEAH, FL 33010

DO NOT WRITE IN THIS SPACE



02142005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1263902 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
GINSBURG, MURRAY
2775 W OKEECHOBEE RD
HIALEAH, FL 33010

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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 _____ (NOTE: Registered Agent signature required when retaking) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GINSBURG, MURRY 2775 W. OKEECHOBEE ROAD HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GINSBURG, ANDREW 2775 W OKEECHOBEE ROAD HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, RANDY 2775 W. OKEECHOBEE RD. HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PRUSSIN, OTTILIE 2775 W OCKOCHOBEE DR HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/17/05-80015-021 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ Date: 2/15/05 Daytime Phone #: 305 887 6170