


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 21, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # F98000006608**  
 1. Entry Name  
 33RD STREET BUFFER, INC.



Principal Place of Business 5858 RIDGEWAY CENTER PKWY MEMPHIS, TN 38120	Mailing Address 5858 RIDGEWAY CENTER PKWY MEMPHIS, TN 38120
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**DO NOT WRITE IN THIS SPACE**



04162008 No Chg-P CR2E034 (11/05)

4. FEI Number 62-1747241	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

DOTSON, ALBERT E JR  
 2500 FIRST UNION FINANCIAL CENTER  
 MIAMI, FL 33131-2336

**DO NOT WRITE IN THIS SPACE**

8. The above named entry 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 reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 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	PC SEELBINDER, OSCAR W JR 5858 RIDGEWAY CENTER PKWY MEMPHIS, TN 38120
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SKLAR, JERALD H 5858 RIDGEWAY CENTER PKWY. MEMPHIS, TN 38120
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 05/08/08-80107-007 158.75

**DO NOT WRITE IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered

**SIGNATURE:**  Oscar Seelbinder <sup>4/16/2008</sup> 901-327-7626

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #