2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000050279

Address:

City-St-Zip:

Entity Name: CAREER COACHES, INC.

FILED Jan 18, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
12276-208 SAN JOSE BOULEVARD JACKSONVILLE, FL 32223				12276 SAN JOSE BOULEVARD SUITE 534 JACKSONVILLE, FL 32223			
Current Mailing Address:				New Mailing Address:			
12276-208 SAN JOSE BOULEVARD JACKSONVILLE, FL 32223				12276 SAN JOSE BOULEVARD SUITE 534 JACKSONVILLE, FL 32223			
FEI Number:	: 59-3687892	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
841 PRUD SUITE 140	JRNER, GRESH JENTIAL DRIVE 30 VILLE, FL 3220						
	named entity s e of Florida.	ubmits this statement for the p	urpose c	of changing i	ts registere	ed office or registered agent, or both,	
SIGNATU	RE:						
Electronic Signature of Registered Agent				Date			
Election Car	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	P/V () FRECHETTE, RG 5911 SWAMP FO JACKSONVILLE	OX ROAD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	S/T () FRECHETTE, ST 5911 SWAMP FO JACKSONVILLE	OX ROAD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	()	Delete		Title: Name:	D WALLACE.	() Change (X) Addition MICHAEL J D	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

1149 WEST KESLEY LANE

JACKSONVILLE, FL 32259 US

SIGNATURE: STEPHANIE FRECHETTE S/T 01/18/2007