

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000017989

Entity Name: TAMPA BAY SPAS, INC.

FILED  
Apr 27, 2007  
Secretary of State

**Current Principal Place of Business:**

936 . BRANDON BLVD  
BRANDON, FL 33594

**New Principal Place of Business:**

936 W. BRANDON BLVD  
BRANDON, FL 33511

**Current Mailing Address:**

936 W. BRANDON BLVD.  
BRANDON, FL 33594

**New Mailing Address:**

936 W. BRANDON BLVD.  
BRANDON, FL 33511

FEI Number: 04-3609081

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORSON, DAVID B  
4602 RIVER OVERLOOK DR  
VALRICO, FL 33594 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: RAGA, GERALD L JR.  
Address: 14912 HERONGLLEN DR  
City-St-Zip: LITHIA, FL 33547

Title: D ( ) Delete  
Name: RAGA, KAREN K  
Address: 14912 HERONGLLEN DR  
City-St-Zip: LITHIA, FL 33547

Title: D ( ) Delete  
Name: CORSON, DAVID B  
Address: 4602 RIVER OVERLOOK DR  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete  
Name: CORSON, ELIZABETH A  
Address: 4602 RIVER OVERLOOK DR  
City-St-Zip: VALRICO, FL 33594

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: DAVID B. CORSON

DIR

04/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date