2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000094497

1. Entity Name 33160 PARTNERS, INC.



FILED Apr 29, 2008 08:00 AN Secretary of State

Principal Place of Business

630 MAPLEWOOD DRIVE

630 MAPLEWOOD DRI

JUPITER, FL 33458

Mailing Address

630 MAPLEWOOD DRIVE

100

DO NOT WRITE IN THIS SPACE

JUPITER, FL 33458



02252008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1289331

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, WILLIAM E 630 MAPLEWOOD DRIVE 100

JUPITER, FL 33458

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

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

OFFICERS AND DIRECTORS 10. CD TITLE SOLOMON, JOHN CII NAME 630 MAPLEWOOD DRIVE #100 STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33458 PD TITLE NAME GRAZIOTTO, RAYMOND E 630 MAPLEWOOD DRIVE, #100 STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33458 COO TITLE NAME GRAZIOTTO, RAYMOND E STREET ADDRESS 630 MAPLEWOOD DRIVE #100 CITY-ST-ZIP JUPITER, FL 33458 **SCFO** TAYLOR, WILLIAM E NAME STREET ADDRESS 630 MAPLEWOOD DRIVE #100 CITY-ST-ZIP JUPITER, FL 33458 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS C!TY-ST-ZIP

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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: WILLIAM & TAYL CFO WILLIAM E. TAYLON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-08

561-625-9443

Daytime F