

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000055177

FILED
Mar 09, 2007
Secretary of State

Entity Name: THE 7397 CORP.

Current Principal Place of Business:

6200 COCONUT TERRACE
PLANTATION, FL 33317

New Principal Place of Business:

515 EAST LAS OLAS BLVD.
1030
FORT LAUDERDALE, FL 33301

Current Mailing Address:

6200 COCONUT TERRACE
PLANTATION, FL 33317

New Mailing Address:

515 EAST LAS OLAS BLVD
1030
FORT LAUDERDALE, FL 33301

FEI Number: 20-4733964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIRSCHMAN, ROBIN A
6200 COCONUT TERRACE
PLANTATION, FL 33317 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: P () Delete
Name: SAUNDERS, DONNA
Address: 98 BURNS AVENUE
City-St-Zip: WYOMING, OH 45215

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HIRSCHMAN, DAVID
Address: 6200 COCONUT TERRACE
City-St-Zip: PLANTATION, FL 33317

Title: VP () Change (X) Addition
Name: SAUNDERS, DONNA
Address: 98 BURNS AVENUE
City-St-Zip: WYOMING, OH 45215

Title: T () Change (X) Addition
Name: HIRSCHMAN, ROBIN R
Address: 6200 COCONUT TERRACE
City-St-Zip: PLANTATION, FL 33317

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.

SIGNATURE: ROBIN R. HIRSCHMAN

T

03/09/2007

Electronic Signature of Signing Officer or Director

_____ Date