


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 08:00 A
Secretary of State

DOCUMENT # P99000009630

1. Entity Name
A NEW ADVENTURE OF TAMPA BAY, INC.



Principal Place of Business Mailing Address

11608 N. DALE MABRY HWY. 11608 N. DALE MABRY HWY.
 TAMPA, FL 33618 TAMPA, FL 33618

DO NOT WRITE IN THIS SPACE



01282008 No Chg-P CR2E034 (11/05)

| | |
|---|---------------------------------------|
| 4. FEI Number 59-3559034 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

GOLDSTEIN, BRUCE S
500 E. KENNEDY BLVD. STE. 200-A
TAMPA, FL 33602

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8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)

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 | PD YOVINO, JOSEPH 11608 NORTH DALE MABRY HIGHWAY TAMPA, FL 33618 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VST VALENTI, ROSE Y 11608 NORTH DALE MABRY HIGHWAY TAMPA, FL 33618 |
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 02/06/08-80064-019 150.00

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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: *Rose Y. Valenti* 1/28/08 813-215-1557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #