## 2008 FOR PROFIT CORPORATION

## **ANNUAL REPORT DOCUMENT # V33990** FILED 1. Entity Name Jul 22, 2008 08:00 AM SUCCESS NOW INC. Secretary of State Principal Place of Business Mailing Address 3570 MAGELLAN CIRCLE 3570 MAGELLAN CIRCLE **UNIT 221 UNIT 221** MIAMI, FL 33180 US MIAMI, FL 33180 US 07072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SANDLER, WILLIAM DO NOT WRITE 3570 MAGELLAN CIRCLE **UNIT 221** IN THIS SPACE MIAMI, FL 33180 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. U00000955664 SIGNATURE. -003 150 00 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 12, 2008 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS TATLE NAME SANDLER, WILLIAM STREET ADDRESS 1550 NE 168TH 307N CITY-ST-ZIP MIAMI, FL 33162 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITS F NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 all other like empowered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF

CITY-ST-ZIP