2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 24, 2007 08:00 AM Secretary of State **DOCUMENT # 182211** 1. Entity Name GAZEBO CORPORATION Principal Place of Business Mailing Address 21034 ROSEDOWN CT 21058 ROSEDOWN COURT BOCA RATON FL 33433 **BOCA RATON FL 33433** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt. #. etc. Suito, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-0792990 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEISS, JEFFERY J 21034 ROSEDOWN CT Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33433** City Zip Code 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 Signature, typed or printed name of registered agent and title if supplicable (NOTE Registered Agent signature required when reinstability) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change WEISS, JEFFREY J. U0000007278ÖÖ NAM NAME 21034 ROSEDOWN CT STREET ADDRESS 05/04/07-80062-023 150.00 STREET ADDRESS **BOCA RATON FL 33433** CHY-SI-ZIP CHY-SI-7IP Delete TILLE Change ☐ Addition NAME. NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY+ST-7IP HILE ☐ Delete 10113 Change Addition NAMI. NAMI. STHEET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY+SI-ZIP DILE Addition Delete 31111 ☐ Change NAME. NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY+S1-7IP TITLE Delete HILL ☐ Change Addition NAME STREET ADDRESS STREET ADORESS CHY-SI-7P CITY-SI-ZIP TITLE Delete THIE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 offect as if made under eath; 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.

CITY-ST-ZIP

SIGNATUR