## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2007 08:00 AM
Secretary of State

		ANNUAL	REPORT		_		1, 200 / 08:00
I. Serby Name NOTNATS CORPORATION  Photopal Plocar of Business  Mailing Address  1115 REDWOOD ST HOLLYWOOD, FL 33019  DO NOT WRITE IN THIS SPACE  10052007 No Chg-P CR2E034 (11/05)  4. FEI Number 59-1302461 No Chg-P CR2E034 (11/05)  5. Name and Address of Current Registered Agent  LEADER, JERRY 1115 REDWOOD ST HOLLYWOOD, FL 33019  DO NOT WRITE IN THIS SPACE  4. The above named entity submit this steemen for the purpose of theoriging as registered agent, or both in the Stein of Florida. I am familiar with, and at the colligations of registered agent.  SIGNATURE  FLEX NOWILL FEET IS \$150.00  After May 1, 2007 Fee will be \$550.00  To. OFFICERS AND DIRECTORS  THAT FROM THE STEIN STEEN S	DOCUM	ENT # 352702				Se	cretary of Sta
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E. Annual and Address of Current Registered Agent  LEADER, JERRY 1115 REDWOOD ST HOLLYWOOD, FL 33019  B. The above remed entity submits this statement for the purpose of changing as registered office or registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligations of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligations of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligations of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligations of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered of Registered collidar or registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the obligation of registered agent, or both, in the Stato of Florida. I am familiar with, and at the stato of Florida. I am familiar with, and at the stato of Florida. I a				<del>-</del>			Not Applicable
E. Name and Address of Current Registered Agent  LEADER, JERRY 1115 REDWOOD ST HOLLYWOOD, FL 33019  B. 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 sm familiar with, and at the obligations of registered agent.  SIGNATURE  FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  Trust Fund Contribution.  Trust Fund Contribution.  DO NOT WRITE IN THIS SPACE  ### PD ###				,	5. Certificate	of Status Desired	\$8.75 Additional Fee Required
IN THIS SPACE  8. The above named entity submite this statement for the purpose of changing its registered office or registered agent, or both, in the State of Rorida. I am familiar with, and at the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and at the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and at the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and at the obligation of registered agent, or both, in the State of Rorida. I am familiar with, and at the obligation of registered agent, or both, in the State of Rorida. I am familiar with, and at the obligation of Rorida. I am familiar wit		6. Name and Address of Current Re	gistered Agent	<u> </u>	l <u> </u>		
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12. Thereby 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 affect 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.

Cfo

SIGNATURE:

STREET ALIDITESS CITY-ST-ZIP

MY JULICIA CPA
ANDAYPED OR PRINTED NAME OF SIGNING OFFICER O

1-8-07

954-925-6299

Daytime Phone #