2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT : 1. Entity Name EBERHARDT PRO			·				
Principal Place of Business 11380 PROSPERITY FARMS ROAD SUITE 201 PALM BEACH GARDENS, FL 33410 Mailing Address 11380 PROSPERITY FARMS ROAD SUITE 201 PALM BEACH GARDENS, FL 33410							
				01072008 No Ci	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
DO NOT WRITE IN THIS SPACE			CE	4. FEI Number 60 3463800		Applied For Not Applicable	
		59-2162800 5. Certificate of Status I		8.75 Additional			
6, Name	and Address of Current Reg	stered Agent	· .	<u> </u>		is Nedulled	
HELGESEN, ANDREW ESQ 11380 PROSPERITY FARMS ROAD SUITE 201 PALM BEACH GARDENS, FL 33410				DO NOT WRITE IN THIS SPACE			
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 Florids. I am familiar with, and accept the obligations of registered agent. SIGNATURE							
Signeture, typed or printed name of registered agent and trits if applicable (NOTE: Registered Agent algosture required when reinstating) DATE							
				.00 May Be ed to Fees		. ,	
10.	OFFICERS AND DIRE	ECTORS		i į	1000000995819 35 769186698	A12 150.00	
NAME EBERHARDT, EBERHARD STREET ADDRESS % 11380 PROSPERITY FARMS RD #201 CITY-ST-ZIP PALM BCH GARDENS, FL 33410				UGC 4			
NAME SCHILDSI STREET ADDRESS C/O 1138(CITY-ST-ZIP PALM BE/							
TITLE NAME						:,	
STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE			
TITLE NAME STREET ADDRESS				IN THIS	SSPACE		
CITY-ST-ZIP			_		•		
NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME			· :				
STREET ADDRESS CITY-ST-ZIP						. :	
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 avaddress, with all other like empowered. SIGNATURE: **SIGNATURE:** **Comparison of 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 supplied with this report of 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 the report 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 the report 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 the report 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 the report of the corporation or the receiver or trustee empowered to execute the receiver 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 the receiver of the receiver or trustee empowered to the receiver of the receiver or trustee empowered to the receiver of the receiver of the rec							
AISHAI OIVE: "	SIGNATURE AND TYPED OR PRINT	TED NAME OF SIGNING OFFICER OR IS	RECTOR	Data		ytime Phone #	

FRANK BOHLDBERG