

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003113

FILED
Feb 10, 2008
Secretary of State

Entity Name: EQUITY-VEST INCORPORATED

Current Principal Place of Business:

100 SOUTH POINTE DRIVE, #2607
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

100 SOUTH POINTE DRIVE, #2607
MIAMI BEACH, FL 33139

New Mailing Address:

201 ANN STREET
EAST LANSING, MI 48823

FEI Number: 38-2039562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEMPKINS, ALAN ESQ.
605 LINCOLN ROAD, #307
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRAMSON, TOM
Address: 201 ANN STREET
City-St-Zip: EAST LANSING, MI 48823

Title: VP () Delete
Name: JOHNSON, RICHARD
Address: 100 SOUTH POINTE DRIVE, #2607
City-St-Zip: MIAMI BEACH, FL 33139

Title: ST () Delete
Name: JOHNSON, TRACEY
Address: 100 SOUTH POINTE DRIVE, #2607
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: JOHNSON, TRACY
Address: 100 SOUTH POINTE DRIVE, #2607
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRACY JOHNSON

ST

02/10/2008

Electronic Signature of Signing Officer or Director

_____ Date