2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 31, 2008 08:00 Al Secretary of State

	ANNUAL	REPURI	£	_		CC.
1. Entity Nam	MENT # G03719 D A. ZAMBO, P.A.			,	Se	ecretary of Sta
Principal Plac 1334 SE MA STUART, FL	CARTHUR BLVD	Mailing Address 1334 SE MACARTHUR BLVD STUART, FL 34996] 	+ 38 (63 (41) (635) (16) (63) (63)	DIS SINIS SIDIS SIDIS SIDIS SIDISDER II IRDI
DO NOT WRITE IN THIS SPACE			CE	01052008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For		
	6. Name and Address of Current R			59-228		Not Applicable Not Applicable \$8.75 Additional Fee Required
ZAMBO, RICHARD A 1334 SE MACARTHUR BLVD STUART, FL 34996			DO NOT WRITE IN THIS SPACE			
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 applicable. (NOTE: Registered FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution.				.00 May Be ed to Fees		DATE
10. OFFICERS AND DIRECTORS					I	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP ZAMBO, RICHARD A 1334 SE MACARTHUR BLVD STUART, FL 34996				11222222	
NAME STREET ADDRESS CITY-ST-ZIP					0000008 04/10/08-8	73215 0069-018 150.00
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WE	RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPA	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						,

12. Thereby 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 reference 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 attaution with an address, with all other like empowered.

SIGNATURE:

ATORE AND WPED ON PRINTED NAME OF SEGRING OFFICER OR DIRECTOR

3/17/08

Date

Zambo

(772) 225-5400

Daytime Phone #