2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J00058

FILED Feb 19, 2008 8:00 am Secretary of State

02-19-2008 90020 007 ***150.00

1. Entity Nam RONALD		SSETTE, D.C., P.	Α.)					
Principal Plac	e of Business	1	Mailing Address	Mailing Address			η ημικινία				
712 S HWY 441/27			712 S HWY 441/27								
LADY LAKE, FL 32159			LADY LAKE, FL 3215	LADY LAKE, FL 32159							
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Principal Place of Business - No P.O. Box # 3. Mailing Address					•	-					
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Suite, Apt. #, etc.			Suite, Apt. #, etc.			02072008	Chg-P	CR2E034	(12/06)		
City & State			City & State			4. FEI Numbe	" 1017 . 59 - 2	2684617	Ap No	plied For t Applicable	
Zip		Country	Zip	ip Country		5. Certificate of Status Desired S8.75 Additional—Fee Required					
6. Name and Address of Current Regi			t Registered Agent	gistered Agent			7. Name and Address of New Registered Agent				
					Name						
MOUSSET 712 S HW LADY LAK	Y 441/27					Street Address (P.O. Box Number is Not Acceptable)					
יארט ו ניטאט	33			·							
					City			FL	Zip Code)	
	named entity tions of registe		for the purpose of changing i	s register	ed office or registe	ered agent, or bot	h, in the State of	Florida. I am fam	iliar with,	and accept	
SIGNATURE.	Signature, typed	or printed name of registered age	nt and title if applicable. (NC	TE: Registere	d Agent signature require	ed when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.											
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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 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.

SIGNATURE:

RON MOUSSEtte
SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

2-15-04 750-5310

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