## 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

if changed, or on an attachment with an address, with all other like empowered.

ME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## May 13, 2008 8:00 am Secretary of State DOCUMENT # J91738 1. Entity Name 05-13-2008 90016 024 \*\*\*150.00 C'EST SI BON OF BRADENTON, INC. Principal Place of Business Mailing Address 8130 LAKEWOOD MAIN ST 8130 LAKEWOOD MAIN ST SUITE 103 SUITE 103 **BRADENTON FL 34202 BRADENTON FL 34202** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Scite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 65-0005492 Not Applicable Ζip Ζip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent A. RADLOFF RADLOFF, PAUL R. 5201 DESOTO ROAD Sireet Address (P.O. Box Number is Not Acceptable) #212 19008 45TH AVE E. SARASOTA FL 34235 BRADENTON 8. The apove 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. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Centribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE X Delete ппр PD Change Addition NAME RADLOFF, PAUL R. NAME RADLOFF, KYLE A. STREET ADDRESS 5201 DESOTO ROAD, #212 STREET ADDRESS 19008 65+1 AUE E CITY-ST-ZIF SARASOTA FL 34235 CITY-ST-ZIP BRADENTON, FL 34202 Delete VD TITLE TITLE Change ☐ Addition RADLOFF, TODD S 19008 65th AWE BRADY, SUSANN L. NAME NAME STREET ADDRESS 1923 SEAN WOOD CIR STREET ADORESS BRANDON FL 33510 CITY-ST-ZIP CITY-ST-ZIP BRADENTON, FL 34202 TITLE Delete TITLE ST Addition RADLOFF TODDS NAME RADLOFF, KYLE A NAME STREET ADDRESS STREET ADDRESS 19008 65TH AVE E CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34202** Bradenton, FL 34202 Delete TITLE TITLE Change Addition MAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Deiete ☐ Change □ Addition MAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ΠR F Asdition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

FILED