2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L06749

FMP U.S. #1 CORP.

Principal Place of Business

2401 PGA BLVD.

SUITE 110

PALM BEACH GARDENS, FL 33410 US

Mailing Address

2401 PGA BLVD.

SUITE 110

PALM BEACH GARDENS, FL 33410

FILED Feb 05, 2007 08:00 AM **Secretary of State**



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CR2E034 (11/05) No Cha-P 01232007

4. FEI Number 65-0140388

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

5. Name and Address of Current Registered Agent

PERRY, F. MARTIN 2401 PGA BLVD. SUITE 110

PALM BEACH GARDENS, FL 33410

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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 acc	ept
the obligations of registered agent.	

SIGNATURE

NAME STREET ADDRESS

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP TITLE

Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. D.P TITLE PERRY, F. MARTIN NAME STREET ADDRESS 2401 PGA BLVD. CITY-ST-ZIP PALM BEACH GARDENS, FL 33410 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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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 oath; that I am an officer or director of the corporation or the receiver or trustee impowered 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: